

**FEC FORM 3X**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

Alvarez & Marsal Holdings, LLC PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼**  **CITY ▲**  **STATE ▲**  **ZIP CODE ▲**

3. IS THIS REPORT  **NEW (N)** **OR**  **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(d) 30-Day **POST-Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period   /  /   /   through   /  /   /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer

Signature of Treasurer  [Electronically Filed] Date   /  /   /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Alvarez & Marsal Holdings, LLC PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		39483.46
(b) Cash on Hand at Beginning of Reporting Period.....	20145.96	
(c) Total Receipts (from Line 19) .....	1562.50	19575.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21708.46	59058.46
7. Total Disbursements (from Line 31).....	2500.00	39850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	19208.46	19208.46
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Alvarez & Marsal Holdings, LLC PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1562.50	19075.00
(ii) Unitemized .....	0.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1562.50	19575.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1562.50	19575.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1562.50	19575.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1562.50	19575.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25350.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	2500.00	14500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2500.00	39850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	39850.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1562.50	19575.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1562.50	19575.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Alvarez & Marsal Holdings, LLC PAC**

**A. NICK ALVAREZ**  
Full Name (Last, First, Middle Initial)  
Mailing Address 124 BEDFORD ROAD  
City SLEEPY HOLLOW State NY Zip Code 10591  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation CONSULTANT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 22 / 2014**  
**Transaction ID : SA11AI.4902**  
Amount of Each Receipt this Period **250.00**  
EMPLOYEE CONTRIBUTION

**B. MICHAEL CAMP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2501 CHISWICK LAKE DRIVE  
City PLANO State TX Zip Code 75093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation CONSULTANT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **2750.00**

Date of Receipt **11 / 25 / 2014**  
**Transaction ID : SA11AI.4885**  
Amount of Each Receipt this Period **250.00**  
PAYROLL DEDUCTION

**C. MICHAEL CAMP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2501 CHISWICK LAKE DRIVE  
City PLANO State TX Zip Code 75093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation CONSULTANT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **3000.00**

Date of Receipt **12 / 22 / 2014**  
**Transaction ID : SA11AI.4890**  
Amount of Each Receipt this Period **250.00**  
PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Alvarez & Marsal Holdings, LLC PAC**

**A. MICHAEL COLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 210A PAGE ROAD  
City NASHVILLE State TN Zip Code 37205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation CONSULTANT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1375.00**

Date of Receipt **11 / 25 / 2014**  
**Transaction ID : SA11AI.4886**  
Amount of Each Receipt this Period **125.00**  
PAYROLL DEDUCTION

**B. MICHAEL COLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 210A PAGE ROAD  
City NASHVILLE State TN Zip Code 37205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation CONSULTANT  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1500.00**

Date of Receipt **12 / 22 / 2014**  
**Transaction ID : SA11AI.4891**  
Amount of Each Receipt this Period **125.00**  
PAYROLL DEDUCTION

**C. SCOTT COLEMAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14 MCBRIDE PLACE  
City GOSHEN State NY Zip Code 10924  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC Occupation ATTORNEY  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **2062.50**

Date of Receipt **11 / 25 / 2014**  
**Transaction ID : SA11AI.4887**  
Amount of Each Receipt this Period **187.50**  
PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>437.50</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Alvarez & Marsal Holdings, LLC PAC**

Full Name (Last, First, Middle Initial) <b>A. SCOTT COLEMAN</b>		Date of Receipt 12 / 22 / 2014 <b>Transaction ID : SA11AI.4892</b>
Mailing Address 14 MCBRIDE PLACE		Amount of Each Receipt this Period 187.50
City GOSHEN	State NY	Zip Code 10924
FEC ID number of contributing federal political committee. C		<b>PAYROLL DEDUCTION</b>
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) <b>B. PATRICK HUGHES</b>		Date of Receipt 11 / 25 / 2014 <b>Transaction ID : SA11AI.4888</b>
Mailing Address 2020 WASHINGTON AVE		Amount of Each Receipt this Period 93.75
City WILMETTE	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		<b>PAYROLL DEDUCTION</b>
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.25	

Full Name (Last, First, Middle Initial) <b>C. PATRICK HUGHES</b>		Date of Receipt 12 / 22 / 2014 <b>Transaction ID : SA11AI.4893</b>
Mailing Address 2020 WASHINGTON AVE		Amount of Each Receipt this Period 93.75
City WILMETTE	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		<b>PAYROLL DEDUCTION</b>
Name of Employer ALVAREZ & MARSAL HOLDINGS, LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1562.50



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Alvarez & Marsal Holdings, LLC PAC**

Full Name (Last, First, Middle Initial)

**A. HOGAN FOR GOVERNOR**

Mailing Address 2635 RIVA ROAD

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
NON-FEDERAL CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 12 / 2014

Transaction ID : SB29.4899

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2500.00

2500.00