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July 11, 2012

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FEC MAIL CENTER

To Whom It May Concern:

Enclosed is the Bulldog Democrats PAC Form 3X for filing deadline 7/15/2012. Included in the total is the total cash on hand are both federal and non-federal funds (which are dispersed separately). Also included is a total for non-federal cash raised. Should any questions arise please contact me at 203-215-9915. Thank you for your time.

Sincerely,

*Nicole Hobbs*

Nicole Hobbs  
Treasurer  
Bulldog Democrats PAC

12030834985



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BULLDOG Democrats PAC

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 04 / 01 / 2012 To: <sup>M M / D D / Y Y Y Y</sup> 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <sup>Y Y Y Y</sup> 2012		8,192.39
(b) Cash on Hand at Beginning of Reporting Period.....	9,201.36	
(c) Total Receipts (from Line 19).....	20.00	1,957.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9,221.36	10,149.39
7. Total Disbursements (from Line 31).....	7,138.88	1,911.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8,537.48	8,537.48
<i>non-federal funds raised: 3000</i>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.	

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

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**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Bulldog Democrats PAC

Report Covering the Period: From: <sup>M</sup>04 / <sup>D</sup>01 / <sup>Y</sup>2012 To: <sup>M</sup>06 / <sup>D</sup>30 / <sup>Y</sup>2012

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).....	, , 20.00	, , 300.00
(ii) Unitemized.....	, , -	, , -
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, , 20.00	, , 300.00
(b) Political Party Committees.....	, , -	, , -
(c) Other Political Committees (such as PACs).....	, , -	, , 1,657.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	, , 20.00	, , 1,957.00
12. Transfers From Affiliated/Other Party Committees.....	, , -	, , -
13. All Loans Received.....	, , -	, , -
14. Loan Repayments Received.....	, , -	, , -
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	, , -	, , -
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	, , -	, , -
17. Other Federal Receipts (Dividends, Interest, etc.).....	, , -	, , -
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	, , -	, , -
(b) Levin Funds (from Schedule H5).....	, , -	, , -
(c) Total Transfers (add 18(a) and 18(b))..	, , -	, , -
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	, , 20.00	, , 1,957.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, , 20.00	, , 1,957.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	, 285.56	, 764.77
(ii) Non-Federal Share.....	, 428.32	, 1,147.14
(b) Other Federal Operating Expenditures .....	, .	, .
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	, 713.88	, 1,911.91
22. Transfers to Affiliated/Other Party Committees.....	, .	, .
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	, .	, .
24. Independent Expenditures (use Schedule E) .....	, .	, .
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	, .	, .
26. Loan Repayments Made.....	, .	, .
27. Loans Made.....	, .	, .
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	, .	, .
(b) Political Party Committees .....	, .	, .
(c) Other Political Committees (such as PACs).....	, .	, .
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	, .	, .
29. Other Disbursements .....	, .	, .
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	, .	, .
(ii) "Levin" Share.....	, .	, .
(b) Federal Election Activity Paid Entirely With Federal Funds .....	, .	, .
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	, .	, .
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	, 713.88	, 1,911.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	, 285.56	, 764.77

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	, , 20.00	, 1,957.00
34. Total Contribution Refunds (from Line 28(d)) .....	, , .	, , .
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	, , 20.00	, 1,957.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	, , 285.56	, , 764.77
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	, , .	, , .
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	, , 285.56	, , 764.77

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**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 1	OF 1
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)  
**BULLDOG Democrats PAC**

Full Name (Last, First, Middle Initial) <b>A. ELISON, JULIE</b>		Date of Receipt MM' DD' YYYY <b>04' 09' 2012</b>
Mailing Address <b>36 Picard Way</b>		Amount of Each Receipt this Period <b>20.00</b>
City <b>Charleston</b>	State Zip Code <b>SC 29412</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.00</b>
Name of Employer <b>Porter-Gaud School</b>	Occupation <b>Principal</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>20.00</b>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>20.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>20.00</b>

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**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)						PAGE	OF
	<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 type="checkbox"/> 29	<input type="checkbox"/> 30b		

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)  
**BULLDOG Democrats PAC**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code			
Purpose of Disbursement	Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		, , .
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code			
Purpose of Disbursement	Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		, , .
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code			
Purpose of Disbursement	Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		, , .
State: District:			

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

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**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE 13 OF FORM 3X	

NAME OF COMMITTEE (In Full)  
**Bulldog Democrats PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address		
City	State ZIP Code	
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
,	,	,

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .

<b>SUBTOTALS</b> This Period This Page (optional).....▶	,	,	.
<b>TOTALS</b> This Period (last page in this line only).....▶	,	,	.
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

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**SCHEDULE D (FEC Form 3X)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Bulldog Democrats PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

1) SUBTOTALS This Period This Page (optional).....▶	, , .
2) TOTALS This Period (last page this line number only).....▶	, , .
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	, , .
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	, , .

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**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Bulldog Democrats PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b>
---	---

Check if  24-hour report     48-hour report     New report     Amends report filed on \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee		Date M M / D D / Y Y Y Y
Mailing Address		Amount
City	State    Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee		Date M M / D D / Y Y Y Y
Mailing Address		Amount
City	State    Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	_____
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	_____
(c) <b>TOTAL</b> Independent Expenditures.....▶	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date    M M / D D / Y Y Y Y

\_\_\_\_\_  
Signature

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**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE	OF
FOR LINE 25 OF FORM 3X	

NAME OF COMMITTEE (In Full) <b>BULLDOG DEMOCRATS PAC</b>					
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee			
		Mailing Address			
		City	State	ZIP Code	
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure		Category/Type	
Mailing Address		Date		M M / D D / Y Y Y Y	
City State Zip Code		Amount			
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: _____ District: _____		
Aggregate General Election Expenditure for this Candidate ▶					
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure		Category/Type	
Mailing Address		Date		M M / D D / Y Y Y Y	
City State Zip Code		Amount			
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: _____ District: _____		
Aggregate General Election Expenditure for this Candidate ▶					
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure		Category/Type	
Mailing Address		Date		M M / D D / Y Y Y Y	
City State Zip Code		Amount			
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: _____ District: _____		
Aggregate General Election Expenditure for this Candidate ▶					
<b>SUBTOTAL of Expenditures This Page (optional).....▶</b>					
<b>TOTAL This Period (last page this line number only).....▶</b>					

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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Bulldog Democrats PAC

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... 40.00 %  
 Nonfederal ..... 60.00 %

This ratio applies to (check all that apply):

Administrative       Generic Voter Drive       Public Communications Referencing Party Only

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**SCHEDULE H2 (FEC Form 3X)**

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
**BULLDOG Democrats PAC**

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

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ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	. %	. %

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE	OF
FOR LINE 18a OF FORM 3X	

NAME OF COMMITTEE (In Full)  
**Buildog Democrats PAC**

NAME OF ACCOUNT	DATE OF RECEIPT M M / D D / Y Y Y Y	TOTAL AMOUNT TRANSFERRED
-----------------	--	--------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....			
<b>ii) Generic Voter Drive</b> .....			
<b>iii) Exempt Activities</b> .....			
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>			
a) _____			
b) _____			
c) Total Amount Transferred For Direct Fundraising .....			
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>			
a) _____			
b) _____			
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....			

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL This Period (Administrative)</b> .....			
<b>TOTAL This Period (Generic Voter Drive)</b> .....			
<b>TOTAL This Period (Exempt Activities)</b> .....			
<b>TOTAL This Period (Direct Fundraising)</b> .....			
<b>TOTAL This Period (Direct Candidate Support)</b> .....			
<b>TOTAL This Period (Public Communications Referring Only to Party)</b> .....			
<b>TOTAL This Period (Total Amount Transferred)</b> .....			

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**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENTS FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Bulldog Democrats PAC

A. Full Name (Last, First, Middle Initial) <u>RUSKIN, Rachel</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>74 High St</u>			Allocated Activity or Event Year-To-Date <u>1,131.57</u>		
City <u>New Haven</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> / <u>03</u> / <u>2012</u>		
Purpose of Disbursement: <u>Web Services</u>			Category/Type <u>001</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>20.00</u>			<u>30.00</u>		<u>50.00</u>

B. Full Name (Last, First, Middle Initial) <u>Hobbs, Nicole</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>302 York St</u>			Allocated Activity or Event Year-To-Date <u>1,159.19</u>		
City <u>New Haven</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> / <u>11</u> / <u>2012</u>		
Purpose of Disbursement: <u>Postage</u>			Category/Type <u>001</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>11.05</u>			<u>16.57</u>		<u>27.62</u>

C. Full Name (Last, First, Middle Initial) <u>Rubin, Josh</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>248 York St</u>			Allocated Activity or Event Year-To-Date <u>1,196.23</u>		
City <u>New Haven</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> / <u>15</u> / <u>2012</u>		
Purpose of Disbursement: <u>Travel</u>			Category/Type <u>002</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>14.82</u>			<u>22.22</u>		<u>37.04</u>

<b>SUBTOTAL of Allocated Federal and NonFederal Activity This Page</b>					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>45.87</u>			<u>68.79</u>		<u>114.66</u>
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))</b>					
FEDERAL SHARE			NONFEDERAL SHARE		TOTAL AMOUNT
<u>285.56</u>			<u>428.32</u>		<u>713.88</u>

12030835001

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENTS FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
BULLDOG DEMOCRATS PAC

A. Full Name (Last, First, Middle Initial) <u>Holmes, Tao Tao</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>74 High St</u>			Allocated Activity or Event Year-To-Date <u>1,235.27</u>		
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> ' <u>15</u> ' <u>2012</u>		
Purpose of Disbursement: <u>TRAVEL</u>			Category/Type <u>002</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>15.62</u>			<u>23.42</u>		<u>39.04</u>

B. Full Name (Last, First, Middle Initial) <u>Hobbs, Nicole</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>302 York St</u>			Allocated Activity or Event Year-To-Date <u>1,400.27</u>		
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> ' <u>16</u> ' <u>2012</u>		
Purpose of Disbursement: <u>FOOD</u>			Category/Type <u>001</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>66.00</u>			<u>99.00</u>		<u>165.00</u>

C. Full Name (Last, First, Middle Initial) <u>Hobbs, Nicole</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address <u>302 York St</u>			Allocated Activity or Event Year-To-Date <u>1,500.27</u>		
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>04</u> ' <u>18</u> ' <u>2012</u>		
Purpose of Disbursement: <u>FOOD</u>			Category/Type <u>001</u>		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>40.00</u>			<u>60.00</u>		<u>100.00</u>

<b>SUBTOTAL of Allocated Federal and NonFederal Activity This Page</b>					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<u>121.62</u>			<u>182.42</u>		<u>304.04</u>
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))</b>					
FEDERAL SHARE			NONFEDERAL SHARE		TOTAL AMOUNT
<u>285.56</u>			<u>428.32</u>		<u>713.88</u>

12030835002

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Bulldog Democrats PAC

A. Full Name (Last, First, Middle Initial) <u>Yale Political Union</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address <u>1 Prospect St</u>			Allocated Activity or Event Year-To-Date <u>156527</u>			
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>05 08 2012</u>			
Purpose of Disbursement: <u>Equipment</u>			Category/ Type <u>001</u>			
Activity or Event Identifier:						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<u>2600</u>			<u>3900</u>			<u>6500</u>

B. Full Name (Last, First, Middle Initial) <u>Connery, Andrew</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address <u>261 Park St</u>			Allocated Activity or Event Year-To-Date <u>157544</u>			
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>05 11 2012</u>			
Purpose of Disbursement: <u>Web Services</u>			Category/ Type <u>001</u>			
Activity or Event Identifier:						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<u>407</u>			<u>610</u>			<u>1017</u>

C. Full Name (Last, First, Middle Initial) <u>Hobbs, Nicole</u>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address <u>302 York St</u>			Allocated Activity or Event Year-To-Date <u>179545</u>			
City <u>NEW HAVEN</u>	State <u>CT</u>	Zip Code <u>06511</u>	Date <u>06 09 2012</u>			
Purpose of Disbursement: <u>OFFICE SUPPLIES</u>			Category/ Type <u>001</u>			
Activity or Event Identifier:						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<u>8800</u>			<u>13201</u>			<u>22001</u>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<u>11807</u>			<u>17711</u>			<u>29518</u>
TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))						
FEDERAL SHARE			NONFEDERAL SHARE			TOTAL AMOUNT
<u>28556</u>			<u>42832</u>			<u>71388</u>

12030835003

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR  
ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

PAGE	OF
FOR LINE 18b OF FORM 3X	

NAME OF COMMITTEE (In Full)

**Bulldog Democrats PAC**

NAME OF ACCOUNT	DATE OF RECEIPT M M / D D / Y Y Y Y	TOTAL AMOUNT TRANSFERRED
		, , .

**BREAKDOWN OF THIS TRANSFER**

<b>i) Voter Registration</b>	VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	, , .
<b>ii) Voter ID</b>	VOTER ID
Total Amount Transferred for Voter ID.....	, , .
<b>iii) GOTV</b>	GOTV
Total Amount Transferred for GOTV .....	, , .
<b>iv) Generic Campaign Activity</b>	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity .....	, , .

NAME OF ACCOUNT	DATE OF RECEIPT M M / D D / Y Y Y Y	TOTAL AMOUNT TRANSFERRED
		, , .

**BREAKDOWN OF THIS TRANSFER**

<b>i) Voter Registration</b>	VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	, , .
<b>ii) Voter ID</b>	VOTER ID
Total Amount Transferred for Voter ID.....	, , .
<b>iii) GOTV</b>	GOTV
Total Amount Transferred for GOTV .....	, , .
<b>iv) Generic Campaign Activity</b>	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity .....	, , .

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

<b>TOTAL This Period (Voter Registration).....</b>	, , .
<b>TOTAL This Period (Voter ID) .....</b>	, , .
<b>TOTAL This Period (GOTV).....</b>	, , .
<b>TOTAL This Period (Generic Campaign Activity).....</b>	, , .
<b>TOTAL This Period (Total Amount of Transfers Received).....</b>	, , .

12030835004

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
**BULLDOG Democrats PAC**

A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	Date
FEDERAL SHARE		+	LEVIN SHARE
		=	TOTAL AMOUNT

B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	Date
FEDERAL SHARE		+	LEVIN SHARE
		=	TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	
Purpose of Disbursement		Category/ Type	Date
FEDERAL SHARE		+	LEVIN SHARE
		=	TOTAL AMOUNT

<b>SUBTOTAL of Shared Federal and Levin Activity This Page</b>			
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
<b>TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))</b>			
FEDERAL SHARE			TOTAL AMOUNT
<b>TOTAL This Period for the Levin Share</b>			

12030835005

**SCHEDULE L (FEC Form 3X)**  
**AGGREGATION PAGE: LEVIN FUNDS**

NAME OF COMMITTEE (In Full) <b>Buildog Democrats PAC</b>
NAME OF ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
<b>1. RECEIPTS FROM PERSONS</b>		
(a) Itemized ..... (Use Schedule L-A)	, , *	, , *
(b) Unitemized .....	, , *	, , *
(c) Total .....	, , *	, , *
<b>2. OTHER RECEIPTS .....</b>	, , *	, , *
<b>3. TOTAL RECEIPTS .....</b> (Add Lines 1c and 2)	, , *	, , *
<b>4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT</b> (Use Schedule L-B)		
(a) Voter Registration .....	, , *	, , *
(b) Voter ID .....	, , *	, , *
(c) GOTV .....	, , *	, , *
(d) Generic Campaign .....	, , *	, , *
(e) Total .....	, , *	, , *
<b>5. OTHER DISBURSEMENTS .....</b>	, , *	, , *
<b>6. TOTAL DISBURSEMENTS .....</b> (Add Lines 4e and 5)	, , *	, , *
<b>7. BEGINNING CASH ON HAND .....</b> (for Column B, use cash as of January 1st)	, , *	, , *
<b>8. RECEIPTS .....</b> (from Line 3)	, , *	, , *
<b>9. SUBTOTAL .....</b> (Add Lines 7 and 8)	, , *	, , *
<b>10. DISBURSEMENTS .....</b> (From Line 6)	, , *	, , *
<b>11. ENDING CASH ON HAND .....</b> (Subtract Line 10 From Line 9)	, , *	, , *

12030835006

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	PAGE	OF
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 1a <input type="checkbox"/> 2	

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)  
**Bulldog Democrats PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt M M / D D / Y Y Y Y
	Mailing Address	Amount of Each Receipt this Period  Aggregate Year-to-Date
	City State Zip Code	
	Name of Employer or Principal Place of Business	
	Occupation	
<b>B.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt M M / D D / Y Y Y Y
	Mailing Address	Amount of Each Receipt this Period  Aggregate Year-to-Date
	City State Zip Code	
	Name of Employer or Principal Place of Business	
	Occupation	
<b>C.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt M M / D D / Y Y Y Y
	Mailing Address	Amount of Each Receipt this Period  Aggregate Year-to-Date
	City State Zip Code	
	Name of Employer or Principal Place of Business	
	Occupation	
<b>D.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt M M / D D / Y Y Y Y
	Mailing Address	Amount of Each Receipt this Period  Aggregate Year-to-Date
	City State Zip Code	
	Name of Employer or Principal Place of Business	
	Occupation	

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

12030835007

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

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

FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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NAME OF COMMITTEE (If Full)  
**Bulldog Democrats PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	M M / D D / Y Y Y Y
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	, , .
<b>B.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	M M / D D / Y Y Y Y
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	, , .
<b>C.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	M M / D D / Y Y Y Y
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	, , .
<b>D.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	M M / D D / Y Y Y Y
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	, , .
<b>E.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	M M / D D / Y Y Y Y
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	, , .

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

12030835008

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

60055802021

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): Fed Ex	Shipping Date 7/12/12
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*JS*  
 PREPARER  
 (3/2005)

7/13/12  
 DATE PREPARED