

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.
ATLAS PAC, FEDERAL

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 DAVID BAUER

Signature of Treasurer DAVID BAUER [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

ATLAS PAC, FEDERAL

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"/>	<input type="text" value="804.67"/>	<input type="text" value="804.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2686.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1200.00"/>	<input type="text" value="3200.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3886.92"/>	<input type="text" value="4004.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="143.25"/>	<input type="text" value="261.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3743.67"/>	<input type="text" value="3743.67"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="3037.45"/>	

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
ATLAS PAC, FEDERAL

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).....	1200.00	3200.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1200.00	3200.00
(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)	1200.00	3200.00
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))..... ▶	1200.00	3200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1200.00	3200.00

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	143.25	261.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	143.25	261.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	0.00	0.00
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)) ..	143.25	261.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143.25	261.00

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)	1200.00	3200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1200.00	3200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	143.25	261.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	143.25	261.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Personal reimbursement submitted after original filing

Form/Schedule:
Transaction ID:

**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 11
<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)
ATLAS PAC, FEDERAL

A. ISAIAH LESLIE
Full Name (Last, First, Middle Initial)

Mailing Address 4885 EAST GAYANN DR.

City Anaheim	State CA	Zip Code 92807
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FEC ID number of contributing federal political committee. **C**

Name of Employer REGAL COURT REPORTING, INC.	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	06	/	2014

Transaction ID : INCA467

Amount of Each Receipt this Period
500.00

B. JEFF MATHEWS
Full Name (Last, First, Middle Initial)

Mailing Address 2053 TUSTIN AVE. #C

City Costa Mesa	State CA	Zip Code 92627
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FEC ID number of contributing federal political committee. **C**

Name of Employer MATHEWS STEEL CO.	Occupation OWNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	07	/	2014

Transaction ID : INCA466

Amount of Each Receipt this Period
500.00

C. JEFF MATHEWS
Full Name (Last, First, Middle Initial)

Mailing Address 2053 TUSTIN AVE. #C

City Costa Mesa	State CA	Zip Code 92627
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FEC ID number of contributing federal political committee. **C**

Name of Employer MATHEWS STEEL CO.	Occupation OWNER
---------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : INCA469

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	1200.00

**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 checked="" 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)
ATLAS PAC, FEDERAL

Full Name (Last, First, Middle Initial)

A. COMPLETE CAMPAIGNS

Mailing Address 610 GATEWAY CENTER WAY #K

City SAN DIEGO State CA Zip Code 92102

Purpose of Disbursement
MERCHANT FEE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 03 / 2014

Transaction ID : EXPB464

Amount of Each Disbursement this Period

56.25

Full Name (Last, First, Middle Initial)

B. COMPLETE CAMPAIGNS

Mailing Address 610 GATEWAY CENTER WAY #K

City SAN DIEGO State CA Zip Code 92102

Purpose of Disbursement
MERCHANT FEE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 17 / 2014

Transaction ID : EXPB468

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)..... ▶

131.25

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

131.25

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **ATLAS PAC, FEDERAL** Transaction ID : **PAYC7**

LOAN SOURCE Full Name (Last, First, Middle Initial) LEE LOWREY	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City NEWPORT BEACH State CA ZIP Code 92658	

Original Amount of Loan 4000.00	Cumulative Payment To Date 3000.00	Balance Outstanding at Close of This Period 1000.00
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TERMS

Date Incurred: MM / DD / YYYY (11 / 07 / 2006) Date Due: MM / DD / YYYY (06 / 30 / 2007) Interest Rate: 0.00 % (apr) Secured: Yes 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: []

SUBTOTALS This Period This Page (optional)..... ▶	1000.00
TOTALS This Period (last page in this line only)..... ▶	1000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ATLAS PAC, FEDERAL

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : PAYD476	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : PAYD497	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : PAYD498	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="825.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ATLAS PAC, FEDERAL

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : PAYD479	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : PAYD480	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="275.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEE LOWREY	Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City State Zip Code NEWPORT BEACH CA 92658	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : PAYD481	
Amount Incurred This Period <input type="text" value="662.45"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="662.45"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1212.45"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="2037.45"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="1000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3037.45"/>