

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. 12FE4M5 Turkish Coaliton USA PAC (TC-USA PAC)

ADDRESS (number and street) 1025 CONNECTICUT AVE SUITE 1000 WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER C C00432526 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 11 / 01 / 2013 through 11 / 30 / 2013

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 G. Lincoln McCurdy

Signature of Treasurer G. Lincoln McCurdy [Electronically Filed] Date 12 / 19 / 2013

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

Turkish Coaliton USA PAC (TC-USA 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="2013"/>	<input type="text" value="1110.89"/>	<input type="text" value="1110.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2947.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10650.00"/>	<input type="text" value="75644.20"/>
(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="13597.24"/>	<input type="text" value="76755.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30774.30"/>	<input type="text" value="93932.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="-17177.06"/>	<input type="text" value="-17177.06"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Turkish Coaliton USA PAC (TC-USA 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).....	10350.00	69544.20
(ii) Unitemized .....	300.00	6100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10650.00	75644.20
(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) .....	10650.00	75644.20
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))..... ▶	10650.00	75644.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10650.00	75644.20

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	324.30	9942.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	324.30	9942.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29950.00	81675.00
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 .....	500.00	2315.00
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)) ..	30774.30	93932.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30774.30	93932.15

**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) .....	10650.00	75644.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10650.00	75644.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	324.30	9942.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	324.30	9942.15

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Although this report reflects a negative cash on hand, deposits were made shortly after the close of the period and prior to distributing the disbursements issued on 11/27/13. The year end report will reflect a postive cash on hand.

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: PAGE 7 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

**A. Jill Atac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5605 Silver Oak Ct.  
 City Derwood State MD Zip Code 20855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Redstar Aviation Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 08 / 2013  
**Transaction ID : SA11AI.8260**  
 Amount of Each Receipt this Period  
 250.00

**B. Oya Bain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9407 Rockville Pike  
 City Bethesda State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 13 / 2013  
**Transaction ID : SA11AI.8251**  
 Amount of Each Receipt this Period  
 100.00

**c. Lydia A. Borland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2816 38th St., NW  
 City Washington State DC Zip Code 20007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2013  
**Transaction ID : SA11AI.8253**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**TOTAL** 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 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

**A. Tuncer Goren**  
Full Name (Last, First, Middle Initial)

Mailing Address 20724 N. Centre Pointe Park Way  
Unit 1

City Santa Clarita State CA Zip Code 91350

FEC ID number of contributing federal political committee. **C**

Name of Employer 3D Products Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 28 / 2013

**Transaction ID : SA11AI.8268**

Amount of Each Receipt this Period  
2500.00

**B. John McGregor**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 6th St., SE #5

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Bob Lawrence & Assoc. Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 13 / 2013

**Transaction ID : SA11AI.8252**

Amount of Each Receipt this Period  
500.00

**C. Narmina Mollazade**  
Full Name (Last, First, Middle Initial)

Mailing Address 1763 T St., NW

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 13 / 2013

**Transaction ID : SA11AI.8249**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<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: PAGE 9 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

**A. Sevil Ozisik**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 Broadway, #1500  
 City New York State NY Zip Code 10006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tooma & Ozisik LLP Occupation Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2013  
**Transaction ID : SA11AI.8266**  
 Amount of Each Receipt this Period  
 500.00

**B. Sezen Uysal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10311 Beach Mill Rd.  
 City Great Falls State VA Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consulting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 22 / 2013  
**Transaction ID : SA11AI.8256**  
 Amount of Each Receipt this Period  
 5000.00

**C. Claudia Vacirca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4752 Reservoir Rd.  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Long & Foster Occupation Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2013  
**Transaction ID : SA11AI.8265**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10350.00

**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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. CXI Corporation**

Mailing Address 1025 Connecticut Ave., NW  
Ste. 1000

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.8216**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. IBackup.com**

Mailing Address 26115 Mureau Rd., St. A

City Calabasas State CA Zip Code 91302

Purpose of Disbursement  
Software

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.8214**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
Online Processing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.8258**

Amount of Each Disbursement this Period

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

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

**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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
Online Processing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2013			

**Transaction ID : SB21B.8270**

Amount of Each Disbursement this Period

96.10
-------

Full Name (Last, First, Middle Initial)

**B. Suntrust Bank**

Mailing Address 1145 New York Ave., NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2013			

**Transaction ID : SB21B.8220**

Amount of Each Disbursement this Period

15.00
-------

Full Name (Last, First, Middle Initial)

**C. www.1and1.com**

Mailing Address 701 Lee Rd., Ste 100

City Chesterbrook State PA Zip Code 19087

Purpose of Disbursement  
Web Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2013			

**Transaction ID : SB21B.8218**

Amount of Each Disbursement this Period

38.28
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

149.38
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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)

<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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. www.1and1.com**

Mailing Address 701 Lee Rd., Ste 100

City Chesterbrook State PA Zip Code 19087

Purpose of Disbursement  
Web Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.8222**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

**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 checked="" 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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. BLUMENAUER FOR CONGRESS**

Mailing Address 830 NE HOLLADAY, #105

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**EARL BLUMENAUER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2013

Transaction ID : **SB23.8239**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CONNOLLY FOR CONGRESS**

Mailing Address PO Box 563

City Merrifield State VA Zip Code 22116

Purpose of Disbursement  
Contribution

011

Candidate Name

**GERRY CONNOLLY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2013

Transaction ID : **SB23.8238**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. CORY BOOKER FOR SENATE**

Mailing Address PO BOX 32237

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement  
Void check issued 8/27/13

011

Candidate Name

**CORY A BOOKER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special-General

State: NJ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2013

Transaction ID : **SB23.8225**

Amount of Each Disbursement this Period

-500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2013

Mailing Address 430 South Capitol Street, SE  
2nd Floor

**Transaction ID : SB23.8248**

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2013

Mailing Address 430 South Capitol Street, SE  
2nd Floor

**Transaction ID : SB23.8229**

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. FOXX PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2013

Mailing Address 22780 INDIAN CREEK DRIVE SUITE 100

**Transaction ID : SB23.8243**

City DULLES State VA Zip Code 20166

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

11000.00
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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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. FOXX PAC**

Mailing Address 22780 INDIAN CREEK DRIVE SUITE 100

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2013

Transaction ID : SB23.8246

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. HASTINGS FOR CONGRESS**

Mailing Address P.O. BOX 100277

City FT. LAUDERDALE State FL Zip Code 33310

Purpose of Disbursement  
Contribution

011

Candidate Name

**ALCEE L HASTINGS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 23

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2013

Transaction ID : SB23.8236

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. LUKE MESSER FOR CONGRESS**

Mailing Address 345 W BROADWAY

City SHELBYVILLE State IN Zip Code 46176

Purpose of Disbursement  
Contribution

011

Candidate Name

**ALLEN LUCAS MESSER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SB23.8224

Amount of Each Disbursement this Period

500.00

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

5000.00

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

**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 checked="" 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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. PETE SESSIONS FOR CONGRESS**

Mailing Address PO BOX 823047

City DALLAS State TX Zip Code 75382

Purpose of Disbursement  
Contribution

011

Candidate Name

**PETE SESSIONS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2013			

Transaction ID : **SB23.8237**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. STEVE COHEN FOR CONGRESS**

Mailing Address 349 KENILWORTH

City MEMPHIS State TN Zip Code 38112

Purpose of Disbursement  
Contribution

011

Candidate Name

**STEVE I MR. COHEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TN District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2013			

Transaction ID : **SB23.8234**

Amount of Each Disbursement this Period

4950.00
---------

Full Name (Last, First, Middle Initial)

**C. STIVERS FOR CONGRESS**

Mailing Address 81 S FIFTH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement  
Contribution

011

Candidate Name

**STEVE STIVERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2013			

Transaction ID : **SB23.8235**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8450.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

**A. THOROUGHbred PAC**

Mailing Address PO BOX 65116  
C/O ARENT FOX PLLC

City WASHINGTON State DC Zip Code 20035

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
11 / 27 / 2013

Transaction ID : SB23.8231

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. WHITFIELD FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement  
Contribution

Candidate Name  
**EDWARD WHITFIELD**

Office Sought:  House  Senate  President  
State: KY District: 01

Disbursement For: 2014  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
11 / 27 / 2013

Transaction ID : SB23.8233

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  
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

# 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)  
**Turkish Coaliton USA PAC (TC-USA PAC)**

Full Name (Last, First, Middle Initial)

### A. Friends of Berdnik for Sheriff

Mailing Address 1360 Clifton Ave.  
Ste. 351

City Clifton State NJ Zip Code 07012

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2013

Transaction ID : SB29.8226

Amount of Each Disbursement this Period

500.00
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

500.00
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500.00
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