

# 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

ESOP PAC

ADDRESS (number and street) 1726 M Street, N.W. Suite 501 Washington DC 20036

Check if different than previously reported. (ACC)

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

C C00196089

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  Convention (12C)  Special (12S)

(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

5. Covering Period 07 / 01 / 2010 through 09 / 30 / 2010

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 J. Michael Keeling Esq.

Signature of Treasurer J. Michael Keeling Esq. [Electronically Filed] Date 02 / 06 / 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

**ESOP 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="2010"/>	<input type="text" value="3568.77"/>	<input type="text" value="3568.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8415.33"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="13122.50"/>	<input type="text" value="80412.50"/>
(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="21537.83"/>	<input type="text" value="83981.27"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17559.70"/>	<input type="text" value="80003.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3978.13"/>	<input type="text" value="3978.13"/>
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

Write or Type Committee Name

**ESOP 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).....	5450.00	44550.00
(ii) Unitemized .....	7672.50	34362.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13122.50	78912.50
(b) Political Party Committees .....	0.00	1000.00
(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) .....	13122.50	79912.50
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	500.00
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))..... ▶	13122.50	80412.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13122.50	80412.50

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	76950.00
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	500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	500.00
29. Other Disbursements .....	559.70	2553.14
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)) ..	17559.70	80003.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17559.70	80003.14

**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) .....	13122.50	79912.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13122.50	79412.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 20  
(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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)  
**A. Victor Alam Esq.**  
 Mailing Address 431 Montwood Circle  
 City State Zip Code  
 Redwood City CA 94061-3326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Menke & Associates Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2010  
**Transaction ID : SA11AI.7002**  
 Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Bruce Armstrong**  
 Mailing Address 300 Harvard Road  
 City State Zip Code  
 San Mateo CA 94402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Menke & Associates Consultant  
 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 Y  
 08 / 25 / 2010  
**Transaction ID : SA11AI.7003**  
 Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Jack Bickel**  
 Mailing Address 83 Concord Road  
 City State Zip Code  
 Acton MA 01720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Acton Partners management consultant  
 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 Y  
 07 / 16 / 2010  
**Transaction ID : SA11AI.7010**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**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: PAGE 7 OF 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert W. Edwards Esq.**

Mailing Address One Citizens Plaza

City State Zip Code  
Providence RI 02903

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

Name of Employer Occupation  
Nixon Peabody LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 19 / 2010  
**Transaction ID : SA11AI.7006**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Ronald J. Gilbert**

Mailing Address 7581 Albevanna Spring Road

City State Zip Code  
Scottsville VA 24592

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

Name of Employer Occupation  
ESOP Services, Inc. consultant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2010  
**Transaction ID : SA11AI.7007**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Roger R. Herting**

Mailing Address 18001 West 106th Street  
Suite 300

City State Zip Code  
Olathe KS 66061

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

Name of Employer Occupation  
Terracon Consultants, Inc. CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2010  
**Transaction ID : SA11AI.7012**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**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 20
	<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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Paul Lindemann</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2010 <b>Transaction ID : SA11AI.7004</b>
Mailing Address One Indiana Square Suite 2800		Amount of Each Receipt this Period 500.00
City Indianapolis	State IN	Zip Code 46204
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Krieg DeVault	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Thomas J. Lisenby</b>		Date of Receipt MM / DD / YYYY 09 / 10 / 2010 <b>Transaction ID : SA11AI.7000</b>
Mailing Address P.O. Box 19527		Amount of Each Receipt this Period 200.00
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 700.00
Name of Employer self-employed	Occupation ESOP trustee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. John W. Menke</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2010 <b>Transaction ID : SA11AI.7005</b>
Mailing Address 170 Estates Drive		Amount of Each Receipt this Period 1000.00
City Piedmont	State CA	Zip Code 94611
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2000.00
Name of Employer Menke & Associates	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1700.00
<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 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ESOP PAC**

**A. Mr. Donald J. Romine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 377 Simarano Drive  
 City Marlborough State MA Zip Code 01752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Web Industries, Inc. Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2010  
**Transaction ID : SA11AI.7001**  
 Amount of Each Receipt this Period  
 1000.00

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5450.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. BOUSTANY, JR, CHARLES W.**

Mailing Address 331 BEVERLY DRIVE

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: LA District: 07

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2010

Transaction ID : **SB23.7021**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. BOUSTANY, JR, CHARLES W.**

Mailing Address 331 BEVERLY DRIVE

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: LA District: 07

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 17 / 2010

Transaction ID : **SB23.7034**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BOUSTANY, JR, CHARLES W.**

Mailing Address 331 BEVERLY DRIVE

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: LA District: 07

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2010

Transaction ID : **SB23.7047**

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. CANTOR FOR CONGRESS**

Mailing Address P. O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: VA District: 07

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 06 / 2010

**Transaction ID : SB23.7033**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CHAMBLISS FOR SENATE**

Mailing Address POST OFFICE BOX 12469

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: GA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2010

**Transaction ID : SB23.7019**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. CITIZENS FOR TOM PETRI**

Mailing Address PO BOX 270

City FOND DU LAC State WI Zip Code 54935

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2010

**Transaction ID : SB23.7041**

Amount of Each Disbursement this Period

250.00

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

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

1250.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2010

Mailing Address 5915 Eastman Avenue Suite 100

**Transaction ID : SB23.7035**

City Midland State MI Zip Code 48640

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. DAVE CAMP FOR CONGRESS 2010**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		12		2010

Mailing Address 5915 Eastman Avenue Suite 100

**Transaction ID : SB23.7067**

City Midland State MI Zip Code 48640

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MI District: 04

Full Name (Last, First, Middle Initial)

**C. DRIEHAUS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2010

Mailing Address 650 Fox Trails Way

**Transaction ID : SB23.7024**

City Cincinnati State OH Zip Code 45233

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 01

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

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

2250.00
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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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. EARL POMEROY FOR CONGRESS**

Mailing Address POST OFFICE BOX 746

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: ND District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	03	/	2010

Transaction ID : SB23.7032

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ERIC PAC**

Mailing Address 209 Pennsylvania Avenue, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2010

Transaction ID : SB23.7037

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVE REICHERT**

Mailing Address P. O. Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WA District: 08

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	28	/	2010

Transaction ID : SB23.7030

Amount of Each Disbursement this Period

500.00
--------

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

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

2000.00
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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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

### A. Friends of John McCain

Mailing Address PO BOX 16664

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: AZ District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 28 / 2010

Transaction ID : SB23.7028

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

### B. FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: NY District: 22

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2010

Transaction ID : SB23.7022

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

### C. FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: NY District: 22

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2010

Transaction ID : SB23.7053

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. GALLEGLY FOR CONGRESS**

Mailing Address PO BOX 940001

City State Zip Code  
SIMI VALLEY CA 93094

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District: 23

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2010

Transaction ID : SB23.7017

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Georgians for Isakson**

Mailing Address P.O. Box 250116

City State Zip Code  
Atlanta GA 30325

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: GA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2010

Transaction ID : SB23.7018

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. GOAL PAC**

Mailing Address P.O. Box 30344

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2010

Transaction ID : SB23.7044

Amount of Each Disbursement this Period

1000.00

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

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

1750.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. GRASSLEY COMMITTEE**

Mailing Address PO BOX 1000

City State Zip Code  
DES MOINES IA 50304

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  
 Other (specify) ▼  
State: IA District: 00

Date of Disbursement

/  /   
07 / 12 / 2010

**Transaction ID : SB23.7016**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. GUTHRIE FOR CONGRESS**

Mailing Address PO Box 9639

City State Zip Code  
Bowling Green KY 42102

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  
 Other (specify) ▼  
State: KY District: 02

Date of Disbursement

/  /   
07 / 28 / 2010

**Transaction ID : SB23.7029**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. HERGER, WALLY**

Mailing Address PO Box 1007  
P.O. Box 1

City State Zip Code  
Willows CA 95988

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  
 Other (specify) ▼  
State: CA District: 02

Date of Disbursement

/  /   
09 / 10 / 2010

**Transaction ID : SB23.7043**

Amount of Each Disbursement this Period

500.00

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

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

1250.00



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

Use separate schedule(s)  
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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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 19 / 2010

**Transaction ID : SB23.7026**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. PETERSON FOR CONGRESS**

Mailing Address 26192 Floyd Lake Point Road

City Detroit Lakes State MN Zip Code 56501

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  Other (specify) ▼

State: MN District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2010

**Transaction ID : SB23.7054**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. RANGEL FOR CONGRESS**

Mailing Address PO Box 5577  
MANHATTANVILLE STA

City New York State NY Zip Code 10027

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  Other (specify) ▼

State: NY District: 15

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2010

**Transaction ID : SB23.7069**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. RANGEL FOR CONGRESS**

Mailing Address PO Box 5577  
MANHATTANVILLE STA

City New York State NY Zip Code 10027

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	0

**Transaction ID : SB23.7070**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. ROBERT HURT FOR CONGRESS**

Mailing Address PO Box 2

City Chatham State VA Zip Code 24531

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: VA District: 05

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

**Transaction ID : SB23.7045**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. ROSKAM FOR CONGRESS COMMITTEE**

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IL District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

**Transaction ID : SB23.7071**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

1	2	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. ROSKAM FOR CONGRESS COMMITTEE**

Mailing Address P. O. Box 713

City State Zip Code  
Wheaton IL 60187

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IL District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
09 / 10 / 2010

**Transaction ID : SB23.7072**

Amount of Each Disbursement this Period

500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. WHITEHOUSE FOR SENATE**

Mailing Address PO BOX 40280

City State Zip Code  
PROVIDENCE RI 02940

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: RI District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
09 / 10 / 2010

**Transaction ID : SB23.7038**

Amount of Each Disbursement this Period

500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. WU FOR CONGRESS**

Mailing Address 818 SW Third Ave., #1182

City State Zip Code  
Portland OR 97204

Purpose of Disbursement

Candidate Name

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

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
09 / 27 / 2010

**Transaction ID : SB23.7048**

Amount of Each Disbursement this Period

250.00

Category/  
Type

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

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

1250.00

17000.00

# 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 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

### A. Bank Charges

Mailing Address P.O. Box 96758  
1800 M Street, N.W.

City Washington State DC Zip Code 20090

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2010

Transaction ID : SB29.7014

Amount of Each Disbursement this Period

559.70
--------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M 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)..... ▶

559.70
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559.70
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