

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

NEW PAC

ADDRESS (number and street) P.O. BOX 7480

Check if different than previously reported. (ACC) VISALIA CA 93290

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

C C00398750

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2013 through 06 / 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 Toni Dian Nunes

Signature of Treasurer Toni Dian Nunes [Electronically Filed] Date 10 / 11 / 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.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NEW 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"/>		84076.95
(b) Cash on Hand at Beginning of Reporting Period.....	84076.95	
(c) Total Receipts (from Line 19)	204500.00	204500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	288576.95	288576.95
7. Total Disbursements (from Line 31).....	139053.63	139053.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	149523.32	149523.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

NEW 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).....	32000.00	32000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32000.00	32000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	172500.00	172500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	204500.00	204500.00
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))..... ▶	204500.00	204500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	204500.00	204500.00

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	87053.63	87053.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	87053.63	87053.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52000.00	52000.00
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)) ..	139053.63	139053.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	139053.63	139053.63

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)	204500.00	204500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	204500.00	204500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	87053.63	87053.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	87053.63	87053.63

**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 68
(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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. BARONA BAND OF MISSION INDIANS

Mailing Address 1095 BARONA RD

City LAKESIDE State CA Zip Code 92040

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 29 / 2013
Transaction ID : SA11AI.8224

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. MATTHEW BUTLER

Mailing Address 3614 SO 193RD ST

City OMAHA State NE Zip Code 68130

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

Name of Employer Occupation
NORTHSTAR CAMPAIGN SYSTEMS PRESIDENT & CHIEF MARKETING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 01 / 2013
Transaction ID : SA11AI.8131

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. THOMAS J MAZZETTA

Mailing Address 1990 SAINT JOHNS AVE

City HIGHLAND PARK State IL Zip Code 60035

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

Name of Employer Occupation
MAZZETTA COMPANY 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
 05 / 10 / 2013
Transaction ID : SA11AI.8223

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. MORONGO BAND OF MISSION INDIANS

Mailing Address P.O. BOX 366

City State Zip Code
CABAZON CA 92230

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2013
Transaction ID : SA11AI.8127

Amount of Each Receipt this Period
5000.00

DATED: 12/31/12 REC'VD; 3/1/13

Full Name (Last, First, Middle Initial)
B. SAN PABLO LYTTON CASINO

Mailing Address 13255 SAN PABLO AVE

City State Zip Code
SAN PABLO CA 94806

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2013
Transaction ID : SA11AI.8221

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. SANTA YNEZ BAND OF MISSION INDIANS

Mailing Address P.O. BOX 517

City State Zip Code
SANTA YNEZ CA 93460

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : SA11AI.8118

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

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 8 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. JOHN D SCOFIELD

Mailing Address 227 C ST SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer SHOCKEY SCOFIELD SOLUTIONS, LL Occupation PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : SA11AI.8249

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. JEFFREY SHOCKEY

Mailing Address 5113 WAPAKONETTA ROAD

City BETHESDA State MD Zip Code 20816

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

Name of Employer SHOCKEY SCOFIELD SOLUTIONS LLC Occupation BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : SA11AI.8248

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
C. SYCUAN BAND OF THE KUMEYAAY NATION

Mailing Address 5459 DEHESA ROAD

City EL CAJON State CA Zip Code 92019

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2013
Transaction ID : SA11AI.8244

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00

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 9 OF 68
	<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)
NEW PAC

Full Name (Last, First, Middle Initial) A. TULE RIVER TRIBAL COUNCIL		Date of Receipt
Mailing Address P.O. BOX 589		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
PORTERVILLE	CA	93258
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.8234
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) B. VANDOR STRATEGIES, LLC		Date of Receipt
Mailing Address 400 N CAPITOL ST, NW		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	DC	20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.8230
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	LL COMPANY...100% OWNED
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. JEFF LOVENG		Date of Receipt
Mailing Address 400 N CAPITOL ST., NW		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	DC	20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.8230.0
Name of Employer	Occupation	Amount of Each Receipt this Period
VANDOR STRATEGIES, LLC	PRINCIPAL/CEO	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	100% OWNER
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="32000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 Abbott Park Rd.
D312 AP6D-2

City Abbott Park State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 26 / 2013

Transaction ID : SA11C.8228

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. AFLAC PAC

Mailing Address WORLDWIDE HEADQUARTERS
1932 WYNNTON ROAD

City COLUMBUS State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 03 / 2013

Transaction ID : SA11C.8251

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW
Suite 400W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 25 / 2013

Transaction ID : SA11C.8125

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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 11 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : SA11C.8143

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : SA11C.8254

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN GAMING ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 1175

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00309146

Name of Employer Occupation

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
 02 / 26 / 2013
Transaction ID : SA11C.8126

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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 12 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2013
Transaction ID : SA11C.8123

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13th Street, NW
12th Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2013
Transaction ID : SA11C.8138

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE BUSCH PLACE 202-7

City State Zip Code
ST. LOUIS MO 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2013
Transaction ID : SA11C.8245

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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 13 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial) A. ARENT FOX LLP PAC (AFPAC)		Date of Receipt
Mailing Address ARENT FOX LLP 1717 K STREET NW		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.	<input type="text" value="C00241380"/>	Transaction ID : SA11C.8240
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) B. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC		Date of Receipt
Mailing Address 1625 PRINCE STREET SUITE 225		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
ALEXANDRIA	VA	22314
FEC ID number of contributing federal political committee.	<input type="text" value="C00250399"/>	Transaction ID : SA11C.8222
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. BANK OF AMERICA CORPORATION FEDERAL PAC		Date of Receipt
Mailing Address 1909 K Street NW Suite 710 DC9-920-07-01		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C00364778"/>	Transaction ID : SA11C.8119
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 14 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

Full Name (Last, First, Middle Initial)
Mailing Address 410 SEVENTEENTH STREET
SUITE 2200
City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 29 / 2013
Transaction ID : SA11C.8129
Amount of Each Receipt this Period: 1000.00

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1310 G Street NW
City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 30 / 2013
Transaction ID : SA11C.8247
Amount of Each Receipt this Period: 2500.00

C. CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2198
City LOS BANOS State CA Zip Code 93635

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 01 / 2013
Transaction ID : SA11C.8128
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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 15 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. CALPINE CORPORATION PAC

Mailing Address 4160 Dublin Blvd., Suite 100

City State Zip Code
Dublin CA 94568

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2013
Transaction ID : SA11C.8238

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. CLEAR CHANNEL COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 200 E. Basse Road

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : SA11C.8266

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
C. CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE

Mailing Address 1201 F STREET, NW SUITE 450

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : SA11C.8134

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 8000.00

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 16 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND

Mailing Address 1000 DARDEN CENTER DRIVE

City State Zip Code
ORLANDO FL 32837

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2013
Transaction ID : SA11C.8257

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii Street
C/O CONGRESSIONAL CONSULTANTS

City State Zip Code
El Segundo CA 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2013
Transaction ID : SA11C.8225

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. EDISON INTERNATIONAL PAC

Mailing Address 520 S GRAND AVENUE SUITE 700

City State Zip Code
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013
Transaction ID : SA11C.8137

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 17 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street
N5A

City Boston State MA Zip Code 02109

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 21 / 2013
Transaction ID : SA11C.8141

Amount of Each Receipt this Period: 2500.00

Full Name (Last, First, Middle Initial)
B. FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street
N5A

City Boston State MA Zip Code 02109

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 07 / 2013
Transaction ID : SA11C.8239

Amount of Each Receipt this Period: 2500.00

Full Name (Last, First, Middle Initial)
C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 18 / 2013
Transaction ID : SA11C.8260

Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00

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 18 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street, SE, Suite 300

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : SA11C.8255

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address 1399 New York Avenue
Suite 720

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2013

Transaction ID : SA11C.8136

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2013

Transaction ID : SA11C.8124

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 19 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial) A. JPMORGAN CHASE & CO. PAC		Date of Receipt
Mailing Address 10 S. Dearborn St IL 1-0520		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City Chicago	State IL	Zip Code 60603
FEC ID number of contributing federal political committee. C C00128512		Transaction ID : SA11C.8256
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)		Date of Receipt
Mailing Address 655 15th Street NW Suite 445		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00236489		Transaction ID : SA11C.8237
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) C. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 2121 CRYSTAL DRIVE SUITE 100		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City ARLINGTON	State VA	Zip Code 22202
FEC ID number of contributing federal political committee. C C00303024		Transaction ID : SA11C.8146
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 20 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 601 Pennsylvania Ave., NW
North Building, Suite 1200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2013

Transaction ID : SA11C.8253

Amount of Each Receipt this Period
2500.00

B. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1875 I Street, NW
Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2013

Transaction ID : SA11C.8258

Amount of Each Receipt this Period
2500.00

C. NATIONAL ASSOCIATION OF REALTORS

Full Name (Last, First, Middle Initial)
Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2013

Transaction ID : SA11C.8140

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 21 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC

Mailing Address 2525 HARRODSBURG ROAD

City	State	Zip Code
LEXINGTON	KY	40504

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : SA11C.8144

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.

City	State	Zip Code
JUNO BEACH	FL	33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2013

Transaction ID : SA11C.8246

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
PG&E CORPORATION EMPLOYEES ENERGYPAC

Mailing Address 77 Beale Street Mail Code: B29H

City	State	Zip Code
San Francisco	CA	94105

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2013

Transaction ID : SA11C.8142

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 22 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 Pennsylvania Avenue N W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 28 / 2013
Transaction ID : SA11C.8265
 Amount of Each Receipt this Period: 2500.00

Full Name (Last, First, Middle Initial)
B. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 13 / 2013
Transaction ID : SA11C.8226
 Amount of Each Receipt this Period: 5000.00

Full Name (Last, First, Middle Initial)
C. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 26 / 2013
Transaction ID : SA11C.8133
 Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

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 23 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address P. O. BOX 718

City WINSTON-SALEM State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : SA11C.8120

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. SEMpra ENERGY EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 101 Ash Street

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C** C00008748

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2013
Transaction ID : SA11C.8261

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 Ralph McGill Blvd NE Bin 10111
BIN 10111

City Atlanta State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : SA11C.8147

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 24 OF 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial) A. TE CONNECTIVITY, INC. POLITICAL ACTION COMMITTEE TELPAC		Date of Receipt
Mailing Address 607 14TH STREET NW STE. 250		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00433482"/>	Transaction ID : SA11C.8242
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) B. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1155 F STREET, NW SUITE 400		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	DC	20004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00284885"/>	Transaction ID : SA11C.8235
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE INC. PAC		Date of Receipt
Mailing Address 55 GLENLAKE PARKWAY NE		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
ATLANTA	GA	30328
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00064766"/>	Transaction ID : SA11C.8227
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 25 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
US ONCOLOGY INC. NETWORK POLITICAL ACTION COMMITTEE (THE US ONCOLOGY NETWORK PAC)

Mailing Address 10101 WOODLOCH FOREST DRIVE

City State Zip Code
THE WOODLANDS TX 77380

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : SA11C.8121

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 18 / 2013
Transaction ID : SA11C.8139

Amount of Each Receipt this Period
5000.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	172500.00

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. STEHPANIE AMARAL

Mailing Address 362 VALLEY VIEW DRIVE

City EXETER State CA Zip Code 93221

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSE

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2013

Transaction ID : SB21B.8092

Amount of Each Disbursement this Period

305.52

Full Name (Last, First, Middle Initial)

B. STEHPANIE AMARAL

Mailing Address 362 VALLEY VIEW DRIVE

City EXETER State CA Zip Code 93221

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSE

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2013

Transaction ID : SB21B.8108

Amount of Each Disbursement this Period

195.17

Full Name (Last, First, Middle Initial)

C. STEHPANIE AMARAL

Mailing Address 362 VALLEY VIEW DRIVE

City EXETER State CA Zip Code 93221

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSE

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2013

Transaction ID : SB21B.8196

Amount of Each Disbursement this Period

250.01

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

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

750.70

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8219

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRANSPORTATION

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8219.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAHOOTS CATERING CO

Mailing Address P.O. BOX 760

City PASO ROBLES State CA Zip Code 93445

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8199

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8082

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
TRANSPORTATION

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8082.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8305

Amount of Each Disbursement this Period

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

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.8082

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. TD GARDEN BOX OFFICE

Mailing Address 100 LEGENDS WAY

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAC FUNDRAISING: FACILITY RENTAL

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2013

Transaction ID : SB21B.8305.0

Amount of Each Disbursement this Period

2995.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SB21B.8109

Amount of Each Disbursement this Period

829.19

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SB21B.8109.0

Amount of Each Disbursement this Period

508.80

[MEMO ITEM]

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

829.19

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.8109

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. OCEANAIRE

Mailing Address 1201 F STREET NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
MEAL

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SB21B.8109.1

Amount of Each Disbursement this Period

233.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING: CATERING/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SB21B.8110

Amount of Each Disbursement this Period

2389.65

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SB21B.8110.1

Amount of Each Disbursement this Period

2273.49

[MEMO ITEM]

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

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

2389.65

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8113

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
TRANSPORTATION

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8113.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING: CATERING/FOOD/BEV/ROOM USAGE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8114

Amount of Each Disbursement this Period

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

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.8113

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. MAMMA MARIA

Mailing Address 3 NORTH SQUARE

City BOSTON State MA Zip Code 02113

Purpose of Disbursement
PAC FUNDRAISING: CATERING/FOOD/BEV/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2013

Transaction ID : SB21B.8114.0

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING: FOOD/BEV/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2013

Transaction ID : SB21B.8114.1

Amount of Each Disbursement this Period

129.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RINCON CRIOLLO

Mailing Address 1145 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89104

Purpose of Disbursement
PAC FUNDRAISING: CATERING/FOOD/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2013

Transaction ID : SB21B.8114.2

Amount of Each Disbursement this Period

290.00

[MEMO ITEM]

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

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

0.00

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CHARTER HOUSE

Mailing Address 129 E FREMONT ST

City LAS VEGAS State NV Zip Code 89101

Purpose of Disbursement
PAC FUNDRAISING: CATERING/FOOD/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2013

Transaction ID : SB21B.8114.3

Amount of Each Disbursement this Period

819.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2013

Transaction ID : SB21B.8216

Amount of Each Disbursement this Period

292.41

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC EVENT EXP: CATERING/FACILITY USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2013

Transaction ID : SB21B.8293

Amount of Each Disbursement this Period

1731.22

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

2023.63

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.8216

ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule: SB21B

Transaction ID: SB21B.8293

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
PAC FUNDRAISING: CATERING/FOOD/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8293.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISER: CATERING/FOOD/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8293.1

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TD GARDEN BOX OFFICE

Mailing Address 100 LEGENDS WAY

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAC FUNDRAISER: FACILITY RENTAL

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8293.2

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. TD GARDEN BOX OFFICE

Mailing Address 100 LEGENDS WAY

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAC FUNDRAISER: CATERING/FOOD/BEV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2013

Transaction ID : SB21B.8293.3

Amount of Each Disbursement this Period

616.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8213

Amount of Each Disbursement this Period

9127.75

Full Name (Last, First, Middle Initial)

C. HERTZ RENT-A-CAR

Mailing Address 460 HEADQUARTERS PLAZA

City MORRISTOWN State NJ Zip Code 07960

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8213.0

Amount of Each Disbursement this Period

622.39

[MEMO ITEM]

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

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

9127.75

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

Form/Schedule: SB21B

Transaction ID : SB21B.8213

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. OMNI PARKER HOUSE

Mailing Address 60 SCHOOL STREET

City BOSTON State MA Zip Code 02108

Purpose of Disbursement
LODGING

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8213.1

Amount of Each Disbursement this Period

2993.38

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
TRANSPORTATION

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8213.2

Amount of Each Disbursement this Period

3874.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BILTMORE HOTEL

Mailing Address 1200 ANASTASIA AVE

City CORAL GABLES State FL Zip Code 33134

Purpose of Disbursement
LODGING

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8213.3

Amount of Each Disbursement this Period

1267.24

[MEMO ITEM]

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

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

0.00

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/ROOM USAGE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8214

Amount of Each Disbursement this Period

1670.61

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/ROOM USAGE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2013

Transaction ID : SB21B.8214.0

Amount of Each Disbursement this Period

1670.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : SB21B.8208

Amount of Each Disbursement this Period

149.62

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

1820.23

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

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

Form/Schedule: SB21B

Transaction ID : SB21B.8208

ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/ROOM USAGE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : **SB21B.8209**

Amount of Each Disbursement this Period

5	6	0	4	.	0	8
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/ROOM USAGE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : **SB21B.8209.0**

Amount of Each Disbursement this Period

4	5	5	3	.	3	0
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/ROOM USAGE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : **SB21B.8209.1**

Amount of Each Disbursement this Period

1	0	5	0	.	7	8
---	---	---	---	---	---	---

[MEMO ITEM]

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

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

5	6	0	4	.	0	8
---	---	---	---	---	---	---

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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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CENTRAL VALLEY BUSINESS FORMS

Mailing Address 7500 W SUNNYVIEW AVE

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC FUNDRAISING EXP: APPRECIATION ITEMS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SB21B.8198

Amount of Each Disbursement this Period

4536.62

Full Name (Last, First, Middle Initial)

B. CITI CARDS

Mailing Address P.O. BOX 6406

City THE LAKES State NV Zip Code 88901

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	03	/	2013

Transaction ID : SB21B.8081

Amount of Each Disbursement this Period

4160.00

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES (VENDOR)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	03	/	2013

Transaction ID : SB21B.8081.0

Amount of Each Disbursement this Period

4160.00

[MEMO ITEM]

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

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

8696.62

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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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CITI CARDS

Mailing Address P.O. BOX 6406

City THE LAKES State NV Zip Code 88901

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	3		

Transaction ID : SB21B.8212

Amount of Each Disbursement this Period

4	0	5	4	.	0	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES (VENDOR)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	3		

Transaction ID : SB21B.8212.0

Amount of Each Disbursement this Period

4	0	5	4	.	0	9
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL EXPENSES

002

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	3		

Transaction ID : SB21B.8084

Amount of Each Disbursement this Period

8	6	8	.	3	2
---	---	---	---	---	---

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

4	9	2	.	4	1
---	---	---	---	---	---

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

4	9	2	.	4	1
---	---	---	---	---	---

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: POSTAGE/SUBSCRIPTION/SERVICE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B.8085

Amount of Each Disbursement this Period

135.46

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: CONSULTING/OFFICE MANAGEMENT

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B.8087

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: FLOWERS FOR FUNERAL

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B.8088

Amount of Each Disbursement this Period

100.17

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

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

685.63

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

Form/Schedule: SB21B

Transaction ID : SB21B.8085

ADDITIONAL ITEMIZATIONS IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
ADVERTISING EXP: DIRECT MARKETING/HATS

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B.8089

Amount of Each Disbursement this Period

515.80

Full Name (Last, First, Middle Initial)

B. PUKKA HEADWEAR

Mailing Address 337 S MAIN STREET

City FINDLEY State OH Zip Code 45840

Purpose of Disbursement
ADVERTISING EXPENSE: DIRECT MARKETING/HATS

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B.8089.0

Amount of Each Disbursement this Period

515.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSES

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
02 / 19 / 2013

Transaction ID : SB21B.8093

Amount of Each Disbursement this Period

5457.29

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

5973.09

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: SUPPLY/SUBSCRIPTION/SERVICE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2013

Transaction ID : SB21B.8094

Amount of Each Disbursement this Period

100.96

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
ADVERTISING EXPENSE: DIRECT MARKETING/HATS

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2013

Transaction ID : SB21B.8098

Amount of Each Disbursement this Period

930.08

Full Name (Last, First, Middle Initial)

C. PUKKA HEADWEAR

Mailing Address 337 S MAIN STREET

City FINDLEY State OH Zip Code 45840

Purpose of Disbursement
ADVERTISING EXPENSE: DIRECT MARKETING/HATS

004
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
02 / 19 / 2013

Transaction ID : SB21B.8098.0

Amount of Each Disbursement this Period

930.08

[MEMO ITEM]

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

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

1031.04

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

Form/Schedule: SB21B

Transaction ID : SB21B.8094

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
VOLUNTEER MEETING EXP: FOOD/BEV/ROOM USAGE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2013

Transaction ID : SB21B.8099

Amount of Each Disbursement this Period

341.57

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
CONSULTING: OFFICE MANAGEMENT

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : SB21B.8103

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: INSURNACE/SERVICE/SUPPLY/POSTAGE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : SB21B.8104

Amount of Each Disbursement this Period

342.67

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

2184.24

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. ALLIED INSURANCE

Mailing Address P.O. BOX 10479

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement
OFFICE EXP: INSURANCE COST

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2013

Transaction ID : SB21B.8104.0

Amount of Each Disbursement this Period

278.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2013

Transaction ID : SB21B.8107

Amount of Each Disbursement this Period

2950.12

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : SB21B.8203

Amount of Each Disbursement this Period

786.15

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

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

3736.27

**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)
NEW PAC

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address P.O. Box 7474		Transaction ID : SB21B.8204
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement ADVERTISING EXPENSES: DIRECT MARKETING/HATS	Amount of Each Disbursement this Period 2673.98
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PUKKA HEADWEAR		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 337 S MAIN STREET		Transaction ID : SB21B.8204.0
City FINDLEY	State OH	
Zip Code 45840	Purpose of Disbursement ADVERTISING EXPENSE: DIRECT MARKETING/HATS	Amount of Each Disbursement this Period 2673.98
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CLARISSA N HENDERSON		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address P.O. Box 7474		Transaction ID : SB21B.8206
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement OFFICE EXP: SUPPLIES-TONER MARKERS/SOFTWARE-LICENSING	Amount of Each Disbursement this Period 188.88
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2862.86
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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
CONSULTING: OFFICE MANAGEMENT

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : SB21B.8172

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSES

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : SB21B.8173

Amount of Each Disbursement this Period

3913.27

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
ADVERTISING EXPENSE: DIRECT MARKETING/HATS/TAGS

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : SB21B.8174

Amount of Each Disbursement this Period

6903.98

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

12317.25

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. PUKKA HEADWEAR

Mailing Address 337 S MAIN STREET

City State Zip Code
FINDLEY OH 45840

Purpose of Disbursement
ADVERTISING EXPENSE: DIRECT MARKETING/HATS

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : SB21B.8174.0

Amount of Each Disbursement this Period

6761.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City State Zip Code
VISALIA CA 93291

Purpose of Disbursement
OFFICE EXP: POSTAGE/OFFICE SUPPLIES-TONER-PINS/COPING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : SB21B.8178

Amount of Each Disbursement this Period

1267.47

Full Name (Last, First, Middle Initial)

C. UPS - SHIPPING SERVICE

Mailing Address 55 GLENLAKE PARKWAY, NE

City State Zip Code
ATLANTA GA 30328

Purpose of Disbursement
OFFICE EXP: POSTAGE/MAILING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : SB21B.8178.0

Amount of Each Disbursement this Period

278.70

[MEMO ITEM]

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

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

1267.47

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

Form/Schedule: SB21B

Transaction ID : SB21B.8178

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 2425 S MOONEY BLVD

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
OFFICE EXP: TONER/PENS/OFFICE SUPPLY

001

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : SB21B.8178.1

Amount of Each Disbursement this Period

3	8	0	.	6	4
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. IDEA PRINTING & GRAPHICS INC

Mailing Address 1921 E MAIN ST

City VISALIA State CA Zip Code 93292

Purpose of Disbursement
OFFICE EXP: COPYING

001

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : SB21B.8178.2

Amount of Each Disbursement this Period

3	5	1	.	8	2
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/RENTALS/MISC

003

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	3

Transaction ID : SB21B.8184

Amount of Each Disbursement this Period

3	7	3	.	6	4	7
---	---	---	---	---	---	---

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

3	7	3	.	6	4	7
---	---	---	---	---	---	---

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

3	7	3	.	6	4	7
---	---	---	---	---	---	---

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

Form/Schedule: SB21B

Transaction ID : SB21B.8184

ADDITIONAL ITEMIZATION IS NOT NECESSARY, AS VENDOR AGGREGATES ARE NOT IN EXCESS OF \$200.

Form/Schedule:

Transaction ID:

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. TAYLOR RENTAL

Mailing Address 2790 BROAD STREET

City State Zip Code
SAN LUIS OBISPO CA 93401

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING RENTALS

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8184.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COSTCO WHOLESALE

Mailing Address 3750 S MOONEY BLVD

City State Zip Code
VISALIA CA 93277

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/MISC SUPPLIES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8184.1

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VILLICANA WINERY

Mailing Address 2725 ADELAIDA RD

City State Zip Code
PASO ROBLES CA 93446

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8184.2

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. ALPHA OMAGA

Mailing Address 1155 MEE LANE

City RUTHERFORD State CA Zip Code 94513

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	1	3		

Transaction ID : SB21B.8184.3

Amount of Each Disbursement this Period

2	7	1	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SMART & FINAL

Mailing Address 600 W CENTER ST

City VISALIA State CA Zip Code 93279

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/SUPPLIES/PAPER GOODS, ETC

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	1	3		

Transaction ID : SB21B.8184.4

Amount of Each Disbursement this Period

1	6	8	.	7	9
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JACK CREEK CELLARS

Mailing Address 5265 JACK CREEK RD

City TEMPLETON State CA Zip Code 93465

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	1			2	0	1	3		

Transaction ID : SB21B.8170

Amount of Each Disbursement this Period

3	4	7	.	6	5
---	---	---	---	---	---

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

3	4	7	.	6	5
---	---	---	---	---	---

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

3	4	7	.	6	5
---	---	---	---	---	---

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. MEMBER LUNCH FUND

Mailing Address 1102 LONGWORTH

City WASHINGTON State DC Zip Code 20515

Purpose of Disbursement
PAC FUNDRAISING EXP: FOOD/BEV

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8080

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. TIO ALBERTO

Mailing Address 841 DOLLIVER ST

City PISMO BEACH State CA Zip Code 93449

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8200

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CHRIS GIBSON FOR CONGRESS

Mailing Address PO Box 247

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
CHRIS P GIBSON

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 20

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2013

Transaction ID : **SB23.8159**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. COFFMAN FOR CONGRESS 2012

Mailing Address 9249 SOUTH BROADWAY #200-501

City HIGHLANDS RANCH State CO Zip Code 80129

Purpose of Disbursement
POLITICAL CONTRIBUTION - DEBT RETIREMENT

011

Candidate Name
MIKE COFFMAN

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2013

Transaction ID : **SB23.8083**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COFFMAN FOR CONGRESS 2012

Mailing Address 9249 SOUTH BROADWAY #200-501

City HIGHLANDS RANCH State CO Zip Code 80129

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
MIKE COFFMAN

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2013

Transaction ID : **SB23.8150**

Amount of Each Disbursement this Period

2000.00

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. COTTON FOR CONGRESS

Mailing Address PO BOX 379

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	3		

City DARDANELLE State AR Zip Code 72834

Transaction ID : **SB23.8168**

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/Type

Amount of Each Disbursement this Period

3000.00

Candidate Name

THOMAS COTTON

Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: AR District: 04	

Full Name (Last, First, Middle Initial)

B. DENHAM FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR., #150

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	3		

City SACRAMENTO State CA Zip Code 95833

Transaction ID : **SB23.8154**

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/Type

Amount of Each Disbursement this Period

2000.00

Candidate Name

JEFF DENHAM

Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 19	

Full Name (Last, First, Middle Initial)

C. FITZPATRICK FOR CONGRESS

Mailing Address 115 North Broad Street

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	3		

City Doylestown State PA Zip Code 18901

Transaction ID : **SB23.8156**

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/Type

Amount of Each Disbursement this Period

2000.00

Candidate Name

MICHAEL G FITZPATRICK

Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: PA District: 08	

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

7000.00

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)
NEW PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF DAVE JOYCE		Date of Disbursement MM / DD / YYYY 05 / 09 / 2013	
Mailing Address 320 KENARDEN DR		Transaction ID : SB23.8153 Amount of Each Disbursement this Period 2000.00	
City HIGHLAND HTS	State OH		Zip Code 44143
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011		
Candidate Name DAVID P JOYCE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 14		

Full Name (Last, First, Middle Initial) B. FRIENDS OF ERIK PAULSEN		Date of Disbursement MM / DD / YYYY 05 / 29 / 2013	
Mailing Address P.O. Box 44369 250 Prairie Center Drive		Transaction ID : SB23.8163 Amount of Each Disbursement this Period 3000.00	
City Eden Prairie	State MN		Zip Code 55344
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011		
Candidate Name ERIK PAULSEN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03		

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOE HECK		Date of Disbursement MM / DD / YYYY 05 / 09 / 2013	
Mailing Address PO Box 750114		Transaction ID : SB23.8151 Amount of Each Disbursement this Period 2000.00	
City Las Vegas	State NV		Zip Code 89136
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011		
Candidate Name JOE HECK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 03		

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

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

7000.00

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. GIBBS FOR CONGRESS

Mailing Address 6992 TR 466

City Lakeville State OH Zip Code 44638

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

ROBERT BRIAN MR. GIBBS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	3

Transaction ID : **SB23.8157**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. HELP AMERICA'S LEADERS POLITICAL ACTION COMMITTEE (HALPAC)

Mailing Address 701 8TH STREET, NW
SUITE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	3

Transaction ID : **SB23.8263**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	3

Transaction ID : **SB23.8169**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

2	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

2	2	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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. RODNEY FOR CONGRESS

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
RODNEY DAVIS

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	3

Transaction ID : **SB23.8152**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
WILLIAM STEVE II SOUTHERLAND

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	3

Transaction ID : **SB23.8155**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. STRICKLAND FOR CONGRESS

Mailing Address PO BOX 1371

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
ANTHONY A STRICKLAND

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	3

Transaction ID : **SB23.8160**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

9	0	0	0	0	0	0	0	0	0
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9	0	0	0	0	0	0	0	0	0
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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)
NEW PAC

Full Name (Last, First, Middle Initial) A. WALORSKI FOR CONGRESS INC		Date of Disbursement MM / DD / YYYY 05 / 09 / 2013
Mailing Address PO Box 954		Transaction ID : SB23.8158
City Mishawaka	State IN	
Zip Code 46546	Purpose of Disbursement POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 2000.00
Candidate Name JACKIE WALORSKI (SWIHART)	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 02		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	
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) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	52000.00