

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines DANPAC

ADDRESS (number and street) 1088 Bishop Street, Suite 1009 Honolulu HI 96813

2. FEC IDENTIFICATION NUMBER C00410787 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 01 2011 through 06 30 2011

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 Calvert G. Chipchase, III Signature of Treasurer Electronically Filed by Calvert G. Chipchase, III Date 07 18 2011

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 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
DANPAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		19549.87
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	19549.87									
(c) Total Receipts (from Line 19) .....	178200.77	178200.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	197750.64	197750.64								
7. Total Disbursements (from Line 31) .....	161068.94	161068.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36681.70	36681.70								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
DANPAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	69700.00	69700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	69700.00	69700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	108500.00	108500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	178200.00	178200.00
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.) .....	0.77	0.77
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 Transfer (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)) .....	178200.77	178200.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	178200.77	178200.77

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	63568.94	63568.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	63568.94	63568.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	95000.00	95000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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 .....	2500.00	2500.00
(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)) .....	2500.00	2500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	161068.94	161068.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	161068.94	161068.94

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) .....	178200.00	178200.00
34. Total Contribution Refunds (from Line 28(d)) .....	2500.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	175700.00	175700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	63568.94	63568.94
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	63568.94	63568.94

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

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

FOR LINE NUMBER: PAGE 6 / 59  
(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)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Gerald S Cassidy

Mailing Address 700 13th Street, NW  
Suite 400

City Washington State DC Zip Code 20005

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

Name of Employer Cassidy & Associates Occupation Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
06 / 13 / 2011

Transaction ID: C3914164

Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mel L. Chettum

Mailing Address P O Box 5083

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Impact Instrumentation Occupation CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
02 / 25 / 2011

Transaction ID: C3675827

Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Denis J Dwyer

Mailing Address 3603 Oval Drive

City Alexandria State VA Zip Code 22308

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

Name of Employer Williams and Jensen Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
03 / 08 / 2011

Transaction ID: C3830789

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 7 / 59  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Daniel S Goldin  
 Mailing Address PO Box 2765  
 City Malibu State CA Zip Code 90265  
 Date of Receipt 02 / 25 / 2011  
**Transaction ID: C3675800**  
 Amount of Each Receipt this Period 2500.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer The Intellis Corporation Occupation Chairman & CEO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 0.00

**B.** Full Name (Last, First, Middle Initial)  
Carol J Grant  
 Mailing Address 53 Brenton Ave  
 City Providence State RI Zip Code 02906  
 Date of Receipt 06 / 20 / 2011  
**Transaction ID: C3920188**  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer First Wind Occupation Senior Vice President, External Affair  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Joe Hamby  
 Mailing Address 559 Old Mill Road  
 City Sandpoint State ID Zip Code 83864  
 Date of Receipt 02 / 14 / 2011  
**Transaction ID: C3659694**  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Tri Marine International Occupation Businessman  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 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: (check only one)	PAGE 8 / 59
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DANPAC**

**A.** Full Name (Last, First, Middle Initial)  
J. Douglas Hines

Mailing Address P O Box 85362

City San Diego State CA Zip Code 92186

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

Name of Employer Bumble Bee Foods Occupation Executive VP/COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 26 / 2011

**Transaction ID: C3659914**

Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Francis J Hogan

Mailing Address 1100 N Point Pky, Ste 200

City West Palm Beach State FL Zip Code 33407

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

Name of Employer Armed Forces Marketing Co-uncil Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2011

**Transaction ID: C3936762**

Amount of Each Receipt this Period 2400.00

**C.** Full Name (Last, First, Middle Initial)  
Francis J Hogan

Mailing Address 1100 N Point Pky, Ste 200

City West Palm Beach State FL Zip Code 33407

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

Name of Employer Armed Forces Marketing Co-uncil Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2011

**Transaction ID: C3936764**

Amount of Each Receipt this Period 600.00

**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: PAGE 9 / 59  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**DANPAC**

**A.** Full Name (Last, First, Middle Initial)  
James Meltsner

Mailing Address 1000 Wilson Boulevard, Suite 2300

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation  
Alenia North America VP Government Relations and Communicat

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
06 / 20 / 2011

**Transaction ID: C3920183**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Denny M Miller

Mailing Address 2 Alexander St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Denny Miller Associates, Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
04 / 08 / 2011

**Transaction ID: C3890596**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
John Miyasato

Mailing Address 5153 Rain Cloud Drive

City State Zip Code  
El Sobrante CA 94803

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

Name of Employer Occupation  
Crossroads Consulting Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY  
02 / 24 / 2011

**Transaction ID: C3675062**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5700.00**

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 59  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Patrick B Nixon

Mailing Address 900 Timber Ridge Dr

City State Zip Code  
Hanover MD 21076

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

Name of Employer American Logistics Association      Occupation President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2011

**Transaction ID:** C3920191

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
William C Oldaker

Mailing Address 11001 Piney Meetinghouse Road

City State Zip Code  
Potomac MD 20854

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

Name of Employer Oldaker & Harris, LLP      Occupation Attorney

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
03 / 03 / 2011

**Transaction ID:** C3830796

Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Joseph B Olding

Mailing Address 3261 Spanish River Dr

City State Zip Code  
Pompano Beach FL 33062

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

Name of Employer Webco      Occupation President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2011

**Transaction ID:** C3920189

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 / 59  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Martin P Paone

Mailing Address 11282 Spyglass Ln

City Reston State VA Zip Code 20191

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

Name of Employer Timmons and Co. Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 14 / 2011  
**Transaction ID: C3920182**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Robbie Rich

Mailing Address 5408 Duvall Dr

City Bethesda State MD Zip Code 20816

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

Name of Employer Markquest Occupation COO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 20 / 2011  
**Transaction ID: C3920185**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Peter J Rose

Mailing Address 409 Hanover St

City Fredericksburg State VA Zip Code 22401-5936

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

Name of Employer Franklin Partnership Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 10 / 2011  
**Transaction ID: C3890598**  
 Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 / 59

(check only one)

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

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.**

Full Name (Last, First, Middle Initial)

Stephen O Rossetti, Jr.

Mailing Address 5408 Duvall Dr

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
American Logistics Association Lobbyist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C3920190

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Philip E Ruter

Mailing Address 6303 Julian St

City State Zip Code  
Springfield VA 22150

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

Name of Employer Occupation  
PRuter One Associates President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C3920186

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Richard L Shampine

Mailing Address 4120 Balboa Dr

City State Zip Code  
Liverpool NY 13090

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

Name of Employer Occupation  
CPS-Timberland Div Dupont Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: C3830794

Amount of Each Receipt this Period

5000.00

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

7000.00

**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 13 / 59  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Carl M Skinner  
 Mailing Address 2472 Haversham Close  
 City State Zip Code  
 Virginia Beach VA 23454  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 1 1  
**Transaction ID:** C3920192  
 Amount of Each Receipt this Period  
 2000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eurpac Service Inc Corporate VP  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick K Sullivan  
 Mailing Address 368 Dune Circle  
 City State Zip Code  
 Kailua HI 96734  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 0 3 / 2 0 1 1  
**Transaction ID:** C3830793  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Oceanit CEO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Phillip Theodosiou  
 Mailing Address 8029 Merry Oaks Ct  
 City State Zip Code  
 Vienna VA 22182-4029  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 1 1  
**Transaction ID:** C3920187  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Theodosiou Consultants Lobbyist  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**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: PAGE 14 / 59

(check only one)

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

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.**

Full Name (Last, First, Middle Initial)

H. Stewart Van Scoyoc

Mailing Address 131 Yarnick Rd

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
Van Scoyoc Associates President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 03 / 2011

Transaction ID: C3830795

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Patricia A Van Scoyoc

Mailing Address 131 Yarnick Rd

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2011

Transaction ID: C3936760

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) .....

69700.00

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

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

FOR LINE NUMBER: PAGE 15 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Alliant Techsystems Employee Citizenship Fund

Mailing Address 1300 Wilson Blvd Ste 400

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00250209

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  
 0 2 / 2 2 / 2 0 1 1

**Transaction ID:** C3675821

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
American Association of Nurse Anesthetists

Mailing Address 25 Massachusetts Ave NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00173153

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  
 0 1 / 2 6 / 2 0 1 1

**Transaction ID:** C3659913

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Association Politcal Action Comm

Mailing Address 325 Seventh Street, N.W.

City State Zip Code  
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00106146

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  
 0 3 / 0 8 / 2 0 1 1

**Transaction ID:** C3830790

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: PAGE 16 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Boeing Company PAC (BPAC)  
Mailing Address 1700 N. Moore St., 20th Floor

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

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
0	3	/	0	1	/	2	0	1	1

**Transaction ID:** C3682320  
 Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Cobham Holdings Inc PAC  
Mailing Address 2121 Crystal Drive

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00457051

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
0	2	/	1	5	/	2	0	1	1

**Transaction ID:** C3675820  
 Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Cubic Corp. Employees PAC  
Mailing Address 9333 Balboa Ave.

City State Zip Code  
San Diego CA 92123

FEC ID number of contributing federal political committee. **C** C00151787

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
0	2	/	2	5	/	2	0	1	1

**Transaction ID:** C3675825  
 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: PAGE 17 / 59  
(check only one)

<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)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
EADS N. Am. Americans For Competition In Aerospace

Mailing Address 1616 North Fort Myer Dr, Ste 1600

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00421230

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2011

Transaction ID: C3830799

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Employees of Northrop Grumman Corporation PAC

Mailing Address 3699 Wilshire Blvd. Ste 1290

City State Zip Code  
Los Angeles CA 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2011

Transaction ID: C3830800

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
General Atomics PAC

Mailing Address P. O. Box 22930

City State Zip Code  
San Diego CA 92122

FEC ID number of contributing federal political committee. **C** C00215285

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2011

Transaction ID: C3830801

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: PAGE 18 / 59  
(check only one)

<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

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)  
**DANPAC**

**A.** Full Name (Last, First, Middle Initial)  
General Dynamics V. P. Contribution Plan

Mailing Address 2941 Fairview Park Drive, Ste. 100

City Falls Church State VA Zip Code 22042-4523

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 25 / 2011  
**Transaction ID: C3675823**  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 22 / 2011  
**Transaction ID: C3675822**  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Glacier PAC

Mailing Address 3242 Cummins Way

City Missoula State MT Zip Code 59802

FEC ID number of contributing federal political committee. **C** C00353953

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 19 / 2011  
**Transaction ID: C3659916**  
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: PAGE 19 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
International Game Technology PAC  
Mailing Address 9295 Prototype Dr  
City Reno State NV Zip Code 89521  
FEC ID number of contributing federal political committee. **C** C00316331  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt MM / DD / YYYY 02 / 15 / 2011  
Transaction ID: C3675819  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Employees' PAC  
Mailing Address 1550 Crystal Drive, Suite 300  
City Arlington State VA Zip Code 22202  
FEC ID number of contributing federal political committee. **C** C00303024  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt MM / DD / YYYY 03 / 14 / 2011  
Transaction ID: C3698720  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Medco Health PAC  
Mailing Address 2350 Kerner Blvd., Suite 250  
City San Rafael State CA Zip Code 94901  
FEC ID number of contributing federal political committee. **C** C00384362  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt MM / DD / YYYY 03 / 08 / 2011  
Transaction ID: C3830791  
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 20 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
National Cable & Telecommunications Association  
 Mailing Address 25 Massachusetts Ave. NW St 100  
 City Washington State DC Zip Code 20001  
 Date of Receipt 02 / 25 / 2011  
 Transaction ID: C3675824  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C C00010082  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Orbital Sciences Corporation PAC (ORB PAC)  
 Mailing Address 21839 Atlantic Blvd  
 City Dulles State VA Zip Code 20166  
 Date of Receipt 01 / 31 / 2011  
 Transaction ID: C3659915  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C C00195263  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**C.** Full Name (Last, First, Middle Initial)  
PAC of the Am. Assn. of Orthopaedic Surgeons  
 Mailing Address 317 Massachussets Ave.  
 City Washington State DC Zip Code 20002  
 Date of Receipt 03 / 08 / 2011  
 Transaction ID: C3830788  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C C00343137  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 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: PAGE 21 / 59

(check only one)

<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)  
DANPAC

**A.**

Full Name (Last, First, Middle Initial)  
Raytheon PAC

Mailing Address 1100 Wilson Blvd., Ste 1500

City State Zip Code  
Arlington VA 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 ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 16 / 2011

Transaction ID: C3915999

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
SAIC Voluntary PAC

Mailing Address 10260 Campus Point Dr, F2

City State Zip Code  
San Diego CA 92121

FEC ID number of contributing federal political committee. **C** C00300418

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  
03 / 14 / 2011

Transaction ID: C3830798

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Step toe & Johnson PAC

Mailing Address 1330 Connecticut Ave., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00431858

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  
03 / 25 / 2011

Transaction ID: C3830797

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: PAGE 22 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Textron Inc. PAC

Mailing Address 1101 Pennsylvania Ave NW #400

City State Zip Code  
Washington DC 20004-2504

FEC ID number of contributing federal political committee. **C** C00123612

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  
 03 / 04 / 2011

**Transaction ID:** C3696654

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Time Warner Cable Inc. Federal PAC

Mailing Address 901 F Street, Suite 800

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00431551

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  
 02 / 25 / 2011

**Transaction ID:** C3675828

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
United States Telecom Association/PAC

Mailing Address 607 14th St, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2011

**Transaction ID:** C3920184

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

**TOTAL** This Period (last page this line number only) ..... ► **108500.00**

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

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

FOR LINE NUMBER: PAGE 23 / 59  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
DANPAC

**A.** Full Name (Last, First, Middle Initial)  
Bank of America  
Mailing Address 730 15th Street NW  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.77

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 1 1  
Transaction ID: C3659917  
Amount of Each Receipt this Period  
0.15

**B.** Full Name (Last, First, Middle Initial)  
Bank of America  
Mailing Address 730 15th Street NW  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.77

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 1 1  
Transaction ID: C3697345  
Amount of Each Receipt this Period  
0.13

**C.** Full Name (Last, First, Middle Initial)  
Bank of America  
Mailing Address 730 15th Street NW  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.77

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1  
Transaction ID: C3830803  
Amount of Each Receipt this Period  
0.14

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.42  
**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 24 / 59

(check only one)

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

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)  
DANPAC

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 730 15th Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

0.77

Date of Receipt

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

Transaction ID: C3915991

Amount of Each Receipt this Period

0.14

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 730 15th Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

0.77

Date of Receipt

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

Transaction ID: C3915994

Amount of Each Receipt this Period

0.14

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 730 15th Street NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

0.77

Date of Receipt

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

Transaction ID: C3936774

Amount of Each Receipt this Period

0.07

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

0.35

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

0.77



**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D232281 Date of Disbursement
	Mailing Address Box 0001	<input type="text" value="01"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Los Angeles State CA Zip Code 90096	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="4.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D232282 Date of Disbursement
	Mailing Address Box 0001	<input type="text" value="01"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Los Angeles State CA Zip Code 90096	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="7.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D232283 Date of Disbursement
	Mailing Address Box 0001	<input type="text" value="01"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Los Angeles State CA Zip Code 90096	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="14.60"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="27.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 59

<input checked="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)  
DANPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express</p>	<p><b>Transaction ID:</b> D233004 <b>Date of Disbursement</b></p>
<p>Mailing Address Box 0001</p>	<p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p>
<p>City Los Angeles State CA Zip Code 90096</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Merchant Fees</p>	<p><input type="text" value="7.95"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express</p>	<p><b>Transaction ID:</b> D239942 <b>Date of Disbursement</b></p>
<p>Mailing Address Box 0001</p>	<p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p>
<p>City Los Angeles State CA Zip Code 90096</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Merchant Fee</p>	<p><input type="text" value="4.95"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express</p>	<p><b>Transaction ID:</b> D239943 <b>Date of Disbursement</b></p>
<p>Mailing Address Box 0001</p>	<p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p>
<p>City Los Angeles State CA Zip Code 90096</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Merchant Fee</p>	<p><input type="text" value="7.95"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="20.85"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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)  
DANPAC

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Box 0001 City Los Angeles State CA Zip Code 90096 Purpose of Disbursement Merchant Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D239944 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 5.93 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Box 0001 City Los Angeles State CA Zip Code 90096 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D243149 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 7.95 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address Box 0001 City Los Angeles State CA Zip Code 90096 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D244037 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 1
	Amount of Each Disbursement this Period 7.95 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.83
<b>TOTAL</b> 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)

PAGE 28 / 59

<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)  
DANPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D244296
	Mailing Address Box 0001	Date of Disbursement 06 / 03 / 2011
	City Los Angeles State CA Zip Code 90096	Amount of Each Disbursement this Period 7.95
	Purpose of Disbursement Merchant Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Atlantis Adventures	Transaction ID: D239951
	Mailing Address 1600 Kapiolani Blvd.	Date of Disbursement 03 / 16 / 2011
	City Honolulu State HI Zip Code 96814	Amount of Each Disbursement this Period 332.82
	Purpose of Disbursement Fundraising - Catered Food	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Atlantis Adventures	Transaction ID: D233129
	Mailing Address 1600 Kapiolani Blvd.	Date of Disbursement 02 / 25 / 2011
	City Honolulu State HI Zip Code 96814	Amount of Each Disbursement this Period 5089.07
	Purpose of Disbursement Fundraising - Catered Food & Beverage	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5429.84
<b>TOTAL</b> 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)

PAGE 29 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D233003 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D232284 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D239945 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fee Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="105.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D244036 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="05"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D244295 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="06"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Auth.net	Transaction ID: D243148 Date of Disbursement
	Mailing Address 293 Boston Post Road West, Ste 220	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Marlborough State MA Zip Code 01752	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="105.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D244033 Date of Disbursement 05 / 02 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 37.45
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Merchant Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D244034 Date of Disbursement 05 / 03 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 69.95
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Merchant Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D244293 Date of Disbursement 06 / 01 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 37.45
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Merchant Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>144.85</b>
<b>TOTAL</b> 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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D244294 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="69.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D243146 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="37.45"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D243147 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="94.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="202.35"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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)  
DANPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 730 15th Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D233128 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 1
	Amount of Each Disbursement this Period 103.50 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 730 15th Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D239935 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period 51.75 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 730 15th Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D239936 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period 37.45 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	192.70
<b>TOTAL</b> 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)  
DANPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239937</p> <p>Date of Disbursement 03 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 317.69</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Charge-Rtn Item</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239938</p> <p>Date of Disbursement 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 12.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Check Order</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239939</p> <p>Date of Disbursement 03 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 76.00</p>

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

405.69

**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)

PAGE 35 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D239940 Date of Disbursement 03 / 10 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 61.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Check Order	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D239941 Date of Disbursement 03 / 17 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 24.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Check Order	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D232279 Date of Disbursement 01 / 03 / 2011
	Mailing Address 730 15th Street NW	Amount of Each Disbursement this Period 258.27
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Merchant Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

343.27

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D232280 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="37.45"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D233001 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="37.45"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D233002 Date of Disbursement
	Mailing Address 730 15th Street NW	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="69.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="144.85"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) BVO-DH MAIN #3 PARKING	Transaction ID: D239947
	Mailing Address	Date of Disbursement 03 / 02 / 2011
	City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period 8.99
	Purpose of Disbursement Fundraising - Parking	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Catherine Pepper	Transaction ID: D243143
	Mailing Address 25615 Laughter Drive	Date of Disbursement 03 / 31 / 2011
	City Aldie State VA Zip Code 20105	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Fundraising coordinator services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Catherine Pepper	Transaction ID: D232276
	Mailing Address 25615 Laughter Drive	Date of Disbursement 01 / 21 / 2011
	City Aldie State VA Zip Code 20105	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Fundraising coordinator services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1508.99
<b>TOTAL</b> 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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Catherine Pepper	Transaction ID: D232998 Date of Disbursement 02 / 22 / 2011
	Mailing Address 25615 Laughter Drive	Amount of Each Disbursement this Period 150.00
	City Aldie State VA Zip Code 20105	
	Purpose of Disbursement Fundraising coordinator services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Catherine Pepper	Transaction ID: D232999 Date of Disbursement 02 / 22 / 2011
	Mailing Address 25615 Laughter Drive	Amount of Each Disbursement this Period 750.00
	City Aldie State VA Zip Code 20105	
	Purpose of Disbursement Fundraising coordinator services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Catherine Pepper	Transaction ID: D244297 Date of Disbursement 06 / 22 / 2011
	Mailing Address 25615 Laughter Drive	Amount of Each Disbursement this Period 750.00
	City Aldie State VA Zip Code 20105	
	Purpose of Disbursement Fundraising coordinator services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1650.00
<b>TOTAL</b> 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)  
DANPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catherine Pepper</p> <p>Mailing Address 25615 Laughter Drive</p> <p>City Aldie State VA Zip Code 20105</p> <p>Purpose of Disbursement Fundraising coordinator services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D244032</p> <p>Date of Disbursement 05 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catherine Pepper</p> <p>Mailing Address 25615 Laughter Drive</p> <p>City Aldie State VA Zip Code 20105</p> <p>Purpose of Disbursement Fundraising coordinator services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243154</p> <p>Date of Disbursement 03 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Chipchase, Masuda &amp; Co., LLP</p> <p>Mailing Address 1088 Bishop Street, Suite 1009</p> <p>City Honolulu State HI Zip Code 96813</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243169</p> <p>Date of Disbursement 05 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 523.56</p>

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

2023.56

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Chipchase, Masuda & Co., LLP	Transaction ID: D243152
	Mailing Address 1088 Bishop Street, Suite 1009	Date of Disbursement MM / DD / YYYY 03 / 17 / 2011
	City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period 1505.24
	Purpose of Disbursement Accounting Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chipchase, Masuda & Co., LLP	Transaction ID: D243853
	Mailing Address 1088 Bishop Street, Suite 1009	Date of Disbursement MM / DD / YYYY 06 / 14 / 2011
	City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period 837.70
	Purpose of Disbursement Accounting Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chipchase, Masuda & Co., LLP	Transaction ID: D232832
	Mailing Address 1088 Bishop Street, Suite 1009	Date of Disbursement MM / DD / YYYY 03 / 03 / 2011
	City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period 1308.90
	Purpose of Disbursement Accounting Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **3651.84**

**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)  
DANPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Chipchase, Masuda & Co., LLP <hr/> Mailing Address 1088 Bishop Street, Suite 1009 <hr/> City Honolulu State HI Zip Code 96813 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D230204 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 1 1	Amount of Each Disbursement this Period 1230.37
<b>B.</b>	Full Name (Last, First, Middle Initial) Chipchase, Masuda & Co., LLP <hr/> Mailing Address 1088 Bishop Street, Suite 1009 <hr/> City Honolulu State HI Zip Code 96813 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239709 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 1	Amount of Each Disbursement this Period 1112.57
<b>C.</b>	Full Name (Last, First, Middle Initial) Cold Stone Creamery <hr/> Mailing Address 700 Keeaumoku St <hr/> City Honolulu State HI Zip Code 96814 <hr/> Purpose of Disbursement Fundraising travel - meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239948 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1	Amount of Each Disbursement this Period 7.01

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>2349.95</b>	
<b>TOTAL</b> 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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Crossroads Consulting <hr/> Mailing Address 707 H Street, NW, 3rd Fl <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Website Development and Maintenance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243145 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 12.75
B.	Full Name (Last, First, Middle Initial) Dulles International <hr/> Mailing Address 45020 Aviation Drive <hr/> City Sterling State VA Zip Code 20166-7506 <hr/> Purpose of Disbursement Parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239949 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 60.00
C.	Full Name (Last, First, Middle Initial) First Hawaiian Bank <hr/> Mailing Address 999 Bishop Street <hr/> City Honolulu State HI Zip Code 96805 <hr/> Purpose of Disbursement Wire transfer fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239930 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 70.00

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

142.75

**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)  
DANPAC

A.

Full Name (Last, First, Middle Initial)  
First Hawaiian Bank

Transaction ID: D245207  
Date of Disbursement

Mailing Address 999 Bishop Street

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

City Honolulu State HI Zip Code 96805

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wire Transfer Fee

70.00
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Harris Lthographics Inc.

Transaction ID: D239934  
Date of Disbursement

Mailing Address 8516 Rainswood Dr

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

City Landover State MD Zip Code 20785

Amount of Each Disbursement this Period

Purpose of Disbursement  
Letterhead/Envelopes

1060.00
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Helen Milby & Co.

Transaction ID: D239933  
Date of Disbursement

Mailing Address 233 Pennsylvania Ave., SE  
Second Fl

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

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Reimb-Taxi-Aloha Weekend

19.00
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1149.00
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**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D243144 Date of Disbursement
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Event Planner Fee	<input type="text" value="3000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D239931 Date of Disbursement
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimb-Fundraising Planner Expenses-Aloha Weekend	<input type="text" value="13487.61"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D232277 Date of Disbursement
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Event Planner Fee	<input type="text" value="3000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="19487.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D232278 Date of Disbursement 01 / 31 / 2011
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Event Planner Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D233000 Date of Disbursement 02 / 22 / 2011
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Event Planner Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D245095 Date of Disbursement 06 / 22 / 2011
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Event Planner Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8000.00
<b>TOTAL</b> 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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D244031 Date of Disbursement 05 / 21 / 2011
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Event Planner Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Helen Milby & Co.	Transaction ID: D243153 Date of Disbursement 03 / 22 / 2011
	Mailing Address 233 Pennsylvania Ave., SE Second Fl	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Event Planner Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Holunape LLC	Transaction ID: D232997 Date of Disbursement 02 / 25 / 2011
	Mailing Address P O Box 588	Amount of Each Disbursement this Period 1000.00
	City Kaneohe State HI Zip Code 96744	
	Purpose of Disbursement Fundraising entertainment-Aloha Weekend event	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<b>TOTAL</b> 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)  
DANPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kapiolani Community College</p> <p>Mailing Address 4303 Diamond Head Road</p> <p>City Honolulu State HI Zip Code 96816</p> <p>Purpose of Disbursement Fundraising-Catered Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239932</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3220.00"/></p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NGP Van, Inc.</p> <p>Mailing Address 1101 15th St., NW Suite 500</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Campaign Software License</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D230831</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NGP Van, Inc.</p> <p>Mailing Address 1101 15th St., NW Suite 500</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Campaign Software License</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D244038</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p> <p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4120.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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)  
DANPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Starbucks Coffee</p> <p>Mailing Address Kamehameha Shopping Center</p> <p>City Honolulu State HI Zip Code 96817</p> <p>Purpose of Disbursement Fundraising travel - meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D233133</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.66"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Starbucks Coffee</p> <p>Mailing Address Hawaii Kai Towne Center</p> <p>City Honolulu State HI Zip Code 96821</p> <p>Purpose of Disbursement Fundraising travel - meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239950</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.96"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tamura's Fine Wine</p> <p>Mailing Address 3436 Waialae Ave</p> <p>City Honolulu State HI Zip Code 96816</p> <p>Purpose of Disbursement Fundraising-Beverages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D233130</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="606.59"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="628.21"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) The Cab	Transaction ID: D239946 Date of Disbursement 03 / 02 / 2011
	Mailing Address 738 Kaheka St, Ste 201	Amount of Each Disbursement this Period 9.00
	City Honolulu State HI Zip Code 96814	
	Purpose of Disbursement Fundraising travel - Taxi	
	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:	

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D233131 Date of Disbursement 02 / 28 / 2011
	Mailing Address Washington Dulles Airport	Amount of Each Disbursement this Period 25.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Travel-Baggage Fee	
	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:	

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D232285 Date of Disbursement 01 / 18 / 2011
	Mailing Address Washington Dulles Airport	Amount of Each Disbursement this Period 907.20
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Fundraising-Travel-Airfare	
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>941.20</b>
<b>TOTAL</b> 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)

PAGE 50 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Zippy's Restaurant	Transaction ID: D233132
	Mailing Address 1765 S King St	Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	City Honolulu State HI Zip Code 96826	Amount of Each Disbursement this Period 22.80
	Purpose of Disbursement Meeting Exp - Meals	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D233032
	Mailing Address 730 15th Street NW	Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 1957.71
	Purpose of Disbursement Credit Card Payment	Category/ Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D243151
	Mailing Address Washington Dulles Airport	Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1957.71
	Purpose of Disbursement Fundraising-Travel Airfare	Category/ Type
	Candidate Name	
	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:	

[MEMO ITEM]

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

1980.51

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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 730 15th Street NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Credit Card Payment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D243150 Date of Disbursement 03 / 21 / 2011  Amount of Each Disbursement this Period 1791.59  Category/ Type
B.	Full Name (Last, First, Middle Initial) Continental Airlines  Mailing Address Washington Dulles Airport  City Washington State DC Zip Code 20005  Purpose of Disbursement Fundraising Travel-Baggage Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D233033 Date of Disbursement 03 / 21 / 2011  Amount of Each Disbursement this Period 25.00  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Moana Surfrider Hotel  Mailing Address 2365 Kalakaua Ave  City Honolulu State HI Zip Code 96815  Purpose of Disbursement Fundraising - Catered Food & Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D233034 Date of Disbursement 03 / 21 / 2011  Amount of Each Disbursement this Period 1038.52  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1791.59
<b>TOTAL</b> 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)

PAGE 52 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Moana Surfrider Hotel	Transaction ID: D233035
	Mailing Address 2365 Kalakaua Ave	Date of Disbursement MM / DD / YYYY 03 / 21 / 2011
	City Honolulu State HI Zip Code 96815	Amount of Each Disbursement this Period 564.73
	Purpose of Disbursement Fundraising - CATERED FOOD & BEVERAGE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Moana Surfrider Hotel	Transaction ID: D233036
	Mailing Address 2365 Kalakaua Ave	Date of Disbursement MM / DD / YYYY 03 / 21 / 2011
	City Honolulu State HI Zip Code 96815	Amount of Each Disbursement this Period 163.34
	Purpose of Disbursement Fundraising - CATERED FOOD & BEVERAGE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	63568.94

# 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)  
DANPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Berkley for Senate</p> <p>Mailing Address 1210 S. Valley View Blvd., Ste 114</p> <p>City Las Vegas State NV Zip Code 89102</p> <p>Purpose of Disbursement Contribution to Candidate Committee</p> <p>Candidate Name Shelley Berkley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243266 <b>Date of Disbursement</b> 05 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Berkley for Senate</p> <p>Mailing Address 1210 S. Valley View Blvd., Ste 114</p> <p>City Las Vegas State NV Zip Code 89102</p> <p>Purpose of Disbursement Contributio to Candidate Committee</p> <p>Candidate Name Shelley Berkley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243267 <b>Date of Disbursement</b> 05 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bob Casey for Senate</p> <p>Mailing Address 303 Massachusetts Ave., NE, 1st Fl</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution to Candidate Committee</p> <p>Candidate Name Robert Casey, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D233089 <b>Date of Disbursement</b> 03 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

15000.00

**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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Bob Casey for Senate	Transaction ID: D233090 Date of Disbursement
	Mailing Address 303 Massachusetts Ave., NE, 1st Fl	<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Robert Casey, Jr.	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carper for Senate	Transaction ID: D243141 Date of Disbursement
	Mailing Address 426 C Street NE	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Thomas Carper	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Carper for Senate	Transaction ID: D243142 Date of Disbursement
	Mailing Address 426 C Street NE	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Thomas Carper	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee	Transaction ID: D233220 Date of Disbursement
	Mailing Address 120 Maryland Avenue, NE	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Klobuchar for Minnesota	Transaction ID: D245197 Date of Disbursement
	Mailing Address P O Box 4146	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Saint Paul State MN Zip Code 55104	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Amy Klobuchar	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MN District:	

C.	Full Name (Last, First, Middle Initial) Manchin for West Virginia	Transaction ID: D233216 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Joe Manchin	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WV District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="25000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 59

<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)  
DANPAC

A.	Full Name (Last, First, Middle Initial) Manchin for West Virginia	Transaction ID: D233217 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Joe Manchin	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) McCaskill for Missouri	Transaction ID: D232275 Date of Disbursement
	Mailing Address PO Box 6771	<input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Saint Louis State MO Zip Code 63144-0771	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Claire McCaskill	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Menendez for Senate	Transaction ID: D232995 Date of Disbursement
	Mailing Address P O Box 848	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Union City State NJ Zip Code 07087	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Candidate Committee	<input type="text" value="5000.00"/>
	Candidate Name Robert Menendez	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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)  
DANPAC

A.

Full Name (Last, First, Middle Initial)  
Menendez for Senate

Transaction ID: D232996  
Date of Disbursement

Mailing Address P O Box 848

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

City State Zip Code  
Union City NJ 07087

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution to Candidate Committee

Category/  
Type

Candidate Name  
Robert Menendez

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District:

B.

Full Name (Last, First, Middle Initial)  
Nelson 2012

Transaction ID: D233218  
Date of Disbursement

Mailing Address P O Box 8666

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

City State Zip Code  
Omaha NE 68108

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution to Candidate Committee

Category/  
Type

Candidate Name  
Ben Nelson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NE District:

C.

Full Name (Last, First, Middle Initial)  
Nelson 2012

Transaction ID: D233219  
Date of Disbursement

Mailing Address P O Box 8666

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

City State Zip Code  
Omaha NE 68108

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution to Candidate Committee

Category/  
Type

Candidate Name  
Ben Nelson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NE District:

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

15000.00

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)

PAGE 58 / 59

<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)  
DANPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Whitehouse for Senate <hr/> Mailing Address P O Box 40280 <hr/> City Providence State RI Zip Code 02940 <hr/> Purpose of Disbursement Contribution to Candidate Committee Candidate Name Sheldon Whitehouse <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D233038 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Whitehouse for Senate <hr/> Mailing Address P O Box 40280 <hr/> City Providence State RI Zip Code 02940 <hr/> Purpose of Disbursement Contribution to Candidate Committee Candidate Name Sheldon Whitehouse <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D233039 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00

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

10000.00

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

95000.00

**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)

PAGE 59 / 59

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
DANPAC

A.

Full Name (Last, First, Middle Initial)  
Daniel S Goldin

Transaction ID: D230427

Date of Disbursement

Mailing Address PO Box 2765

<sup>M</sup> 0	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 8	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 1	<sup>Y</sup> 1
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City Malibu State CA Zip Code 90265

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Contribution Refund

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2500.00

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

2500.00