

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
ESOP PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		3568.77
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	3568.77									
(c) Total Receipts (from Line 19)	18896.00	18896.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22464.77	22464.77								
7. Total Disbursements (from Line 31)	14620.29	14620.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7844.48	7844.48								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
ESOP PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	9300.00	9300.00
(ii) Unitemized	8096.00	8096.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17396.00	17396.00
(b) Political Party Committees	1000.00	1000.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	18396.00	18396.00
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	500.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	18896.00	18896.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18896.00	18896.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	13000.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1620.29	1620.29
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))..	14620.29	14620.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14620.29	14620.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	18396.00	18396.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18396.00	18396.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) Mr James Bado		Date of Receipt	
	Mailing Address 12710 CR 216		M M / D D / Y Y Y Y 03 / 08 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6849
	Findlay	OH	45840	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Workplace Development Incorporated		Occupation consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Robert W. Edwards, Esq.		Date of Receipt	
	Mailing Address One Citizens Plaza		M M / D D / Y Y Y Y 03 / 01 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6856
	Providence	RI	02903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Nixon Peabody LLP		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Kelly Finnell		Date of Receipt	
	Mailing Address 7660 Poplar Pike Floor 2		M M / D D / Y Y Y Y 02 / 24 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6859
	Germantown	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Executive Financial Services		Occupation executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
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 7 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.

Full Name (Last, First, Middle Initial) Mr. Tim Jochim	Date of Receipt MM / DD / YYYY 03 / 05 / 2010
Mailing Address 673 Mohawk Street Suite 202	Transaction ID: SA11AI.6853
City Columbus State OH Zip Code 43206	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Jochim Co., L.P.A. Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.

Full Name (Last, First, Middle Initial) Mr. Andrew Kulesza	Date of Receipt MM / DD / YYYY 02 / 18 / 2010
Mailing Address 323 Wayne Avenue	Transaction ID: SA11AI.6864
City Cincinnati State OH Zip Code 45215	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	
Name of Employer R.E. Kramig & Co., Inc. Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

C.

Full Name (Last, First, Middle Initial) Ms Susan Lenczewski	Date of Receipt MM / DD / YYYY 03 / 16 / 2010
Mailing Address 80 South Eighth Street 500 IDS Center	Transaction ID: SA11AI.6848
City Minneapolis State MN Zip Code 55402	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	
Name of Employer Gray Plant Mooty et al Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 18
(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)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
Mr. Thomas J. Lisenby

Mailing Address P.O. Box 19527

City State Zip Code
Houston TX 77024

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

Name of Employer self-employed Occupation
ESOP trustee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2010

Transaction ID: SA11AI.6862

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Richard C. Mapp, Esq.

Mailing Address 150 West Main Street Suite 2100

City State Zip Code
Norfolk VA 23510-1665

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

Name of Employer Kaufman & Canoles Occupation
attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2010

Transaction ID: SA11AI.6854

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. John W. Menke

Mailing Address 170 Estates Drive

City State Zip Code
Piedmont CA 94611

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

Name of Employer Menke & Associates Occupation
attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2010

Transaction ID: SA11AI.6858

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) Ms. Karen Ng	Date of Receipt MM / DD / YYYY 03 / 22 / 2010
	Mailing Address 50 California Street 36th Floor	Transaction ID: SA11AI.6847
	City San Francisco State CA Zip Code 94111	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ludwig Goldberg & Krenzel Occupation attorneys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Lonnie Pepler-Moyer	Date of Receipt MM / DD / YYYY 03 / 22 / 2010
	Mailing Address P.O. Box 1176 20 West First Street	Transaction ID: SA11AI.6846
	City Monroe State MI Zip Code 48161	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Monroe Publishing Company Occupation publisher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Hugh Reynolds	Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 10 West Broad Street Suite 1700	Transaction ID: SA11AI.6855
	City Columbus State OH Zip Code 43215	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Crowe Chizek & Company, LLP Occupation consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
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 10 / 18
	<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)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) Mr. Stephen R. Ringlee		Date of Receipt MM / DD / YYYY 03 / 08 / 2010
	Mailing Address 377 Simarano Drive		Transaction ID: SA11AI.6852
	City Marlborough	State MA	Zip Code 01752
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer Web Industries, Inc.	Occupation Board of Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Thomas Roback, Jr.		Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 100 North Beaumont Avenue		Transaction ID: SA11AI.6857
	City Baltimore	State MD	Zip Code 21228-4403
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Blue Ridge ESOP Associates	Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Cindy Turcot		Date of Receipt MM / DD / YYYY 02 / 24 / 2010
	Mailing Address 128 Intervale Road		Transaction ID: SA11AI.6861
	City Burlington	State VT	Zip Code 05401
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Gardener's Supply Company	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1300.00
TOTAL This Period (last page this line number only)	9300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 18	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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) ESOP PAC

A.	Full Name (Last, First, Middle Initial) ACADIAN AMBULANCE SERVICE INC EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address PO BOX 98000	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City State Zip Code LAFAYETTE LA 70509	Transaction ID: SA11B.6868
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00335570"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 18	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) ESOP PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN TANNER	Date of Receipt
	Mailing Address POST OFFICE BOX 1994	<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City State Zip Code UNION CITY TN 38281	Transaction ID: SA16.6842
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00223230"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
	Name of Employer Occupation	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="500.00"/>

A. Form/Schedule : **SB23**
Transaction ID : **SB23.6828**

The designation of \$1000 for Cantor for Congress dated March 16, 2010 should be changed to being for the general election as it was a clerical error. This error has now been corrected.

**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 15 / 18

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

A. FRIENDS OF MAURICE HINCHEY

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: NY District: 22

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6826

Date of Disbursement

03 / 02 / 2010

Amount of Each Disbursement this Period

1000.00

B. Georgians for Isakson

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: GA District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6881

Date of Disbursement

02 / 08 / 2010

Amount of Each Disbursement this Period

1000.00

C. GOAL PAC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 30344

City Bethesda State MD Zip Code 20824

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6833

Date of Disbursement

03 / 10 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 16 / 18

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
LEVIN FOR CONGRESS COMMITTEE

Mailing Address 30636 DEQUINDRE

City WARREN State MI Zip Code 48092

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: MI District: 12

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6820

Date of Disbursement

01 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
LEVIN FOR CONGRESS COMMITTEE

Mailing Address 30636 DEQUINDRE

City WARREN State MI Zip Code 48092

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: MI District: 12

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6830

Date of Disbursement

03 / 30 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
MALONEY FOR CONGRESS

Mailing Address 49 EAST 92ND STREET

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: NY District: 14

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6816

Date of Disbursement

01 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 17 / 18

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) RANGEL FOR CONGRESS <hr/> Mailing Address PO BOX 5577 MANHATTANVILLE STA <hr/> City NEW YORK State NY Zip Code 10027 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.6829 Date of Disbursement <input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
B.	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS <hr/> Mailing Address PO BOX 1919 <hr/> City JANESVILLE State WI Zip Code 53547 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 01	Transaction ID: SB23.6818 Date of Disbursement <input type="text" value="01"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
C.	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS <hr/> Mailing Address PO BOX 1919 <hr/> City JANESVILLE State WI Zip Code 53547 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 01	Transaction ID: SB23.6827 Date of Disbursement <input type="text" value="03"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

13000.00

**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 18 / 18

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Mitch Landriau</p> <p>Mailing Address P.O. Box 57629</p> <p>City New Orleans State LA Zip Code 70157</p> <p>Purpose of Disbursement contribution to Mitch for Mayor-running for Mayor of New Orleans</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>Transaction ID: SB29.6836</p> <p>Date of Disbursement MM / DD / YYYY 01 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Richard Mourdock</p> <p>Mailing Address P.O. Box 185</p> <p>City Inglesfield State IN Zip Code 47618</p> <p>Purpose of Disbursement contribution to Richard Mourdock running for Indiana State Treasurer</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>Transaction ID: SB29.6839</p> <p>Date of Disbursement MM / DD / YYYY 01 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

1500.00