

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

EDPAC

ADDRESS (number and street)

499 SOUTH CAPITOL ST SW SUITE 422

 Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00467837

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on

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

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on

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

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2012

through

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2012

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 Mr. Randall Broz

Signature of Treasurer

Mr. Randall Broz

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

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
OnlyFEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

EDPAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="8977.39"/>	<input type="text" value="8977.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15187.74"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="56500.00"/>	<input type="text" value="69000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="71687.74"/>	<input type="text" value="77977.39"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="48592.21"/>	<input type="text" value="54881.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23095.53"/>	<input type="text" value="23095.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

EDPAC

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

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).....	500.00	500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	500.00	500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	56000.00	68500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	56500.00	69000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	56500.00	69000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	56500.00	69000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3592.21	6881.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3592.21	6881.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	38000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	10000.00	10000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	48592.21	54881.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48592.21	54881.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	56500.00	69000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56500.00	69000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3592.21	6881.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3592.21	6881.86

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 OF 25
<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	

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)
EDPAC

A. Richard Edson
Full Name (Last, First, Middle Initial)

Mailing Address 4250 E West Hwy.

City Bethesda	State MD	Zip Code 20814
------------------	-------------	-------------------

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

Name of Employer Housing Capital Advisors	Occupation Consulting
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	21	/	2012

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

**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 7 OF 25
<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)
EDPAC

Full Name (Last, First, Middle Initial) A. AIR LINE PILOTS ASSOCIATION PAC		Date of Receipt
Mailing Address 1625 MASSACHUSETTS AVE. NW		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code WASHINGTON DC 20036		Transaction ID : SA11C.4579
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00035451"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA CORPORATION FEDERAL PAC		Date of Receipt
Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950 DC8-455-09-01		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City State Zip Code WASHINGTON DC 20004		Transaction ID : SA11C.4589
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00364778"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) C. COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE, THE		Date of Receipt
Mailing Address 701 Pennsylvania Avenue, NW Suite 750		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Washington DC 20004		Transaction ID : SA11C.4594
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00039578"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer	Occupation	Contribution
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="8500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
<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)
EDPAC

Full Name (Last, First, Middle Initial)
A. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 Pennsylvania Avenue, NW
South Building, Suite 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2012

Transaction ID : SA11C.4586

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
B. FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2012

Transaction ID : SA11C.4591

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2012

Transaction ID : SA11C.4599

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 11000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
<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)
EDPAC

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2012

Transaction ID : SA11C.4602

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 412 First Street, SE, Suite 300

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2012

Transaction ID : SA11C.4598

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 Seventh St, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2012

Transaction ID : SA11C.4583

Amount of Each Receipt this Period
5000.00

Contribution

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: (check only one)	PAGE 10 OF 25
<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)
EDPAC

A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 07 / 2012
Transaction ID : SA11C.4581
 Amount of Each Receipt this Period: 5000.00
 Contribution

B. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1550 Crystal Drive Suite 300

City Arlington	State VA	Zip Code 22202
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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: 06 / 04 / 2012
Transaction ID : SA11C.4585
 Amount of Each Receipt this Period: 5000.00
 Contribution

C. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1717 RHODE ISLAND AVE NW SUITE 400

City WASHINGTON	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 28 / 2012
Transaction ID : SA11C.4604
 Amount of Each Receipt this Period: 5000.00
 Contribution

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 11 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)
A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

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
 06 / 07 / 2012

Transaction ID : SA11C.4600

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
B. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 540

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 27 / 2012

Transaction ID : SA11C.4595

Amount of Each Receipt this Period
1500.00

Contribution

Full Name (Last, First, Middle Initial)
C. NELNET INC PAC (NELNET PAC)

Mailing Address 1050 CONNECTICUT AVENUE, NW
10TH FLOOR

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00370015

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 03 / 2012

Transaction ID : SA11C.4593

Amount of Each Receipt this Period
2000.00

Contribution

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 12 OF 25
<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)
EDPAC

Full Name (Last, First, Middle Initial)
A. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 15 / 2012
Transaction ID : SA11C.4596

Amount of Each Receipt this Period 2500.00

Contribution

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

Mailing Address 1301 K Street, NW
Suite 800W

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2012
Transaction ID : SA11C.4582

Amount of Each Receipt this Period 1000.00

Contribution

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

Mailing Address 1100 Wilson Blvd
Suite 1500

City Arlington State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 21 / 2012
Transaction ID : SA11C.4584

Amount of Each Receipt this Period 1500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)
A. SAFEWAY INC. POLITICAL ACTION COMMITTEE (SAFEWAY PAC)
 Mailing Address 5918 Stoneridge Mall Road
 City Pleasanton State CA Zip Code 94588
 FEC ID number of contributing federal political committee. **C** C00194084
 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 Y Y
 05 / 15 / 2012
Transaction ID : SA11C.4606
 Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

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

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶ 56000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. Political Development Group, LLC

Mailing Address 499 S. Capitol St., SW
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4566

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Political Development Group, LLC

Mailing Address 499 S. Capitol St., SW
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4567

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Political Development Group, LLC

Mailing Address 499 S. Capitol St., SW
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4574

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. Political Development Group, LLC

Mailing Address 499 S. Capitol St., SW
Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Food and Beverage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4575

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. BETTY SUTTON FOR CONGRESS

Mailing Address PO BOX 14693

City State Zip Code
COPLEY OH 44321

Purpose of Disbursement
Contribution

011

Candidate Name

BETTY S SUTTON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

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

Transaction ID : **SB23.4561**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH AVE

City State Zip Code
PORTLAND OR 97214

Purpose of Disbursement
Contribution

011

Candidate Name

SUZANNE BONAMICI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OR District: 01

Date of Disbursement

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

Transaction ID : **SB23.4565**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. BRALEY FOR CONGRESS

Mailing Address PO BOX 390

City State Zip Code
WATERLOO IA 50704

Purpose of Disbursement
Contribution

011

Candidate Name

BRUCE L BRALEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

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

Transaction ID : **SB23.4564**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. BRALEY FOR CONGRESS

Mailing Address PO BOX 390

City WATERLOO State IA Zip Code 50704

Purpose of Disbursement
Contribution

011

Candidate Name

BRUCE L BRALEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2012

Transaction ID : **SB23.4549**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CHRISTIE VILSACK FOR IOWA

Mailing Address PO BOX 641

City AMES State IA Zip Code 50010

Purpose of Disbursement
Contribution

011

Candidate Name

CHRISTIE VILSACK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 04

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Transaction ID : **SB23.4554**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COURTNEY FOR CONGRESS

Mailing Address 31 BIRCHWOOD

City SPRINGVALE State ME Zip Code 04083

Purpose of Disbursement
Contribution

011

Candidate Name

JOSEPH D COURTNEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 02

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Transaction ID : **SB23.4553**

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)

<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)
EDPAC

Full Name (Last, First, Middle Initial)

A. COURTNEY FOR CONGRESS

Mailing Address 31 BIRCHWOOD

City SPRINGVALE State ME Zip Code 04083

Purpose of Disbursement
Contribution

011

Candidate Name
JOSEPH D COURTNEY

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: CT District: 02

Date of Disbursement

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

Transaction ID : SB23.4550

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

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

Date of Disbursement

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

Transaction ID : SB23.4573

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. DENNY HECK FOR CONGRESS

Mailing Address PO BOX 235

City OLYMPIA State WA Zip Code 98507

Purpose of Disbursement
Contribution

011

Candidate Name
DENNIS HECK

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: WA District: 10

Date of Disbursement

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

Transaction ID : SB23.4523

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	2	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. DONNELLY FOR INDIANA

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution

011

Candidate Name

JOSEPH S DONNELLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 00

Date of Disbursement

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

Transaction ID : SB23.4562

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. DONNELLY FOR INDIANA

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution

011

Candidate Name

JOSEPH S DONNELLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 00

Date of Disbursement

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

Transaction ID : SB23.4545

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CHARLIE WILSON

Mailing Address P.O. BOX 334

City BRIDGEPORT State OH Zip Code 43912

Purpose of Disbursement
Contribution

011

Candidate Name

CHARLES A WILSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	2

Transaction ID : SB23.4534

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

3	0	0	0	0	0	0	0	0	0
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1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF CHRIS MURPHY		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address PO BOX 127		Transaction ID : SB23.4557
City CHESHIRE	State CT	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name CHRISTOPHER S MURPHY	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: CT District: 00	

Full Name (Last, First, Middle Initial) B. FRIENDS OF CHRIS MURPHY		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address PO BOX 127		Transaction ID : SB23.4546
City CHESHIRE	State CT	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name CHRISTOPHER S MURPHY	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: CT District: 00	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOE BACA		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 555 CAPITOL MALL, SUITE 1425		Transaction ID : SB23.4517
City SACRAMENTO	State CA	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name JOE BACA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 35	

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)

<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)
EDPAC

Full Name (Last, First, Middle Initial)

A. HORSFORD FOR CONGRESS

Mailing Address 6100 ELTON AVE SUITE 1000

City LAS VEGAS State NV Zip Code 89107

Purpose of Disbursement
Contribution

011

Candidate Name

STEVEN ALEXZANDER HORSFORD

Category/
Type

Office Sought: House
 Senate
 President
State: NV District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2012

Transaction ID : SB23.4539

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHN TIERNEY FOR CONGRESS

Mailing Address 49 FEDERAL STREET

City SALEM State MA Zip Code 01970

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN F TIERNEY

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2012

Transaction ID : SB23.4514

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KATHY HOCHUL FOR CONGRESS

Mailing Address PO BOX 64

City BUFFALO State NY Zip Code 14231

Purpose of Disbursement
Contribution

011

Candidate Name

KATHLEEN COURTNEY HOCHUL

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 27

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Transaction ID : SB23.4558

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)

<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)
EDPAC

Full Name (Last, First, Middle Initial) A. KIRKPATRICK FOR ARIZONA		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012	
Mailing Address PO BOX 12011		Transaction ID : SB23.4535 Amount of Each Disbursement this Period 1000.00	
City CASA GRANDE	State AZ		Zip Code 85130
Purpose of Disbursement Contribution	Category/ Type 011		
Candidate Name ANN KIRKPATRICK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: AZ	District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KISSELL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012	
Mailing Address P.O. BOX 1530		Transaction ID : SB23.4520 Amount of Each Disbursement this Period 1000.00	
City BISCOE	State NC		Zip Code 27209
Purpose of Disbursement Contribution	Category/ Type 011		
Candidate Name LARRY W KISSELL	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: NC	District: 08	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KURT SCHRADER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012	
Mailing Address PO Box 3314 Suite 240		Transaction ID : SB23.4538 Amount of Each Disbursement this Period 1000.00	
City Oregon City	State OR		Zip Code 97045
Purpose of Disbursement Contribution	Category/ Type 011		
Candidate Name KURT SCHRADER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: OR	District: 05	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

<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)
EDPAC

Full Name (Last, First, Middle Initial)

A. MARK CRITZ FOR CONGRESS COMMITTEE

Mailing Address 551 MAIN STREET SUITE 120

City JOHNSTOWN State PA Zip Code 15901

Purpose of Disbursement
Debt Contribution

011

Candidate Name

MARK CRITZ

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2012

Transaction ID : **SB23.4530**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MARTIN HEINRICH FOR SENATE

Mailing Address P.O. BOX 25763

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Contribution

011

Candidate Name

MARTIN TREVOR HEINRICH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2012

Transaction ID : **SB23.4542**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PASTOR FOR ARIZONA

Mailing Address PO BOX 1978

City PHOENIX State AZ Zip Code 85001

Purpose of Disbursement
Contribution

011

Candidate Name

ED L PASTOR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2012

Transaction ID : **SB23.4531**

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)..... ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. THE REYES COMMITTEE, INC.

Mailing Address 1011 MONTANA AVE

City EL PASO State TX Zip Code 79902

Purpose of Disbursement
Contribution

011

Candidate Name

SILVESTRE REYES

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 16

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2012

Transaction ID : **SB23.4569**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address P.O. BOX 536926

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement
Contribution

011

Candidate Name

VALDEZ VAL DEMINGS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2012

Transaction ID : **SB23.4527**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2000.00

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

35000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial)

A. COLORADO DEMOCRATIC PARTY

Mailing Address 777 Santa Fe Drive

City State Zip Code
Denver CO 80204

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2012

Transaction ID : SB29.4572

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

10000.00

10000.00
