



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		6325.33
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	183818.94									
(c) Total Receipts (from Line 19) .....	10485.00	259491.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	194303.94	265816.94								
7. Total Disbursements (from Line 31) .....	4478.00	75991.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	189825.94	189825.94								
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

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	9

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) .....	8225.00	184480.00
(ii) Unitemized .....	2260.00	75011.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10485.00	259491.61
(b) Political Party Committees .....	0.00	0.00
(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) .....	10485.00	259491.61
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 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)) .....	10485.00	259491.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10485.00	259491.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	5.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	5.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
24. Independent Expenditure (use Schedule E) .....	1978.00	1978.00
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	10200.00
(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	10200.00
29. Other Disbursements.....	2000.00	63308.00
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))..	4478.00	75991.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4478.00	75991.00

**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 .....	10485.00	259491.61
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10485.00	249291.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	5.00
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	5.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11  
(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)  
**FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Miss Lillie Britton

Mailing Address 1717 Alliant Ave  
Ste 21

City State Zip Code  
**Louisville KY 40299-6302**

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 0 / 2 0 0 9

**Transaction ID: SA11AI.11551**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Reverend Rensselaer Broekhuizen

Mailing Address 1057 S Shore Dr

City State Zip Code  
**Holland MI 49423-4500**

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

Name of Employer Self-Employed      Occupation E.D.P. Management

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      **4000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

**Transaction ID: SA11AI.11545**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Scott Hassler

Mailing Address 21 Tarleton Ln

City State Zip Code  
**Ladera Ranch CA 92694-1303**

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

Name of Employer KPI      Occupation Sales

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      **700.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 9

**Transaction ID: SA11AI.11503**

Amount of Each Receipt this Period  
700.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1700.00

**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 / 11
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. William Henry

Mailing Address 61 Sologne Cir

City State Zip Code  
Little Rock AR 72223-8913

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

Name of Employer Info requested per best effort  
Occupation Info requested per best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2009

**Transaction ID:** SA11AI.11472

Amount of Each Receipt this Period  
3000.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Joan Langenberg

Mailing Address 41 Glen Eagles Dr

City State Zip Code  
Saint Louis MO 63124-1653

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

Name of Employer None  
Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2009

**Transaction ID:** SA11AI.11505

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John Slivinski

Mailing Address 529 Blanche Dr

City State Zip Code  
Saint Charles MO 63303-5910

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

Name of Employer Info requested per best effort  
Occupation Info requested per best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2009

**Transaction ID:** SA11AI.11540

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

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

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NAME OF COMMITTEE (In Full)  
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Carol Teodoro

Mailing Address 3008 E Bay Dr NW

City State Zip Code  
Gig Harbor WA 98335

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

Name of Employer Occupation  
Advanced Women's Health Medical Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2009

**Transaction ID:** SA11AI.11470

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Linda Wade

Mailing Address 20796A Meadowbrook Dr

City State Zip Code  
Abingdon VA 24211-5598

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2009

**Transaction ID:** SA11AI.11532

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1025.00

**TOTAL** This Period (last page this line number only) ..... ► 8225.00



**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 9 / 11

<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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
DOUG HOFFMAN FOR CONGRESS

Mailing Address 111 RIVER STREET

City State Zip Code  
SARANAC LAKE NY 12983

Purpose of Disbursement  
Contribution

Candidate Name  
DOUGLAS L HOFFMAN

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

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼  
Special-General

Transaction ID: SB23.11607

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

Category/  
Type

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)

PAGE 10 / 11

<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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Brownback for Governor, Inc.

Mailing Address PO Box 3739

City  
Topeka

State  
KS

Zip Code  
66604

Purpose of Disbursement  
Nonfederal contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.11619

Date of Disbursement

10 / 28 / 2009

Amount of Each Disbursement this Period

2000.00

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

2000.00

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

2000.00

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION CO- MMITTEE	FEC IDENTIFICATION NUMBER <b>C</b> C00452383
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Phil Maglione

Mailing Address  
265 Hegeman Ave.

City State Zip Code  
Colchester VT 05446

Purpose of Expenditure Category/  
Purchase of radio ti- Type 004  
me

Name of Federal Candidate supported or Opposed by expenditure:  
DOUGLAS L HOFFMAN

Calendar Year-To-Date Per Election for Office Sought 1978.00

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

Amount  
980.00

Transaction ID: SE.9289

Office Sought:  House State: NY  
 Senate District: 23  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2009

Full Name (Last, First, Middle, Initial) of Payee  
Stephen's Media Group

Mailing Address  
134 Mullin Street

City State Zip Code  
Watertown NY 13601

Purpose of Expenditure Category/  
Purchase of radio ti- Type 004  
me

Name of Federal Candidate supported or Opposed by expenditure:  
DOUGLAS L HOFFMAN

Calendar Year-To-Date Per Election for Office Sought 998.00

Date  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Amount  
998.00

Transaction ID: SE.9288

Office Sought:  House State: NY  
 Senate District: 23  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2009

(a) SUBTOTAL of Itemized Independent Expenditures .....	1978.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	1978.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Paul Tripodi  
Signature

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