

# 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

Searchlight Leadership Fund

ADDRESS (number and street) 700 13th Street, NW Suite 600 Washington DC 20005

Check if different than previously reported. (ACC)

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

C C00327395

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 05 / 01 / 2012 through [MM] / [DD] / [YYYY] 05 / 31 / 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 Claude Zobell

Signature of Treasurer Claude Zobell [Electronically Filed] Date 06 / 20 / 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 Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Searchlight Leadership Fund**

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"/>		196095.57
(b) Cash on Hand at Beginning of Reporting Period.....	385418.05	
(c) Total Receipts (from Line 19) .....	48735.00	614620.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	434153.05	810715.57
7. Total Disbursements (from Line 31).....	106374.00	482936.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	327779.05	327779.05
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Searchlight Leadership Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4250.00	206300.00
(ii) Unitemized .....	985.00	3020.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5235.00	209320.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	43500.00	400300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	48735.00	609620.00
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	5000.00
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))..... ▶	48735.00	614620.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	48735.00	614620.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	95374.00	361486.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	95374.00	361486.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	71000.00
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	1000.00
(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	1000.00
29. Other Disbursements .....	5000.00	49450.00
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)) ..	106374.00	482936.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	106374.00	482936.52

**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) .....	48735.00	609620.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48735.00	608620.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	95374.00	361486.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	95374.00	361486.52

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Searchlight Leadership Fund**

**A. Shamoon Ahmad**  
Full Name (Last, First, Middle Initial)

Mailing Address 9008 Greensboro Lane

City Las Vegas State NV Zip Code 89134

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

Name of Employer Self Employed Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
05 / 30 / 2012  
**Transaction ID : C19424650**

Amount of Each Receipt this Period  
2500.00

**B. Heather M. Podesta**  
Full Name (Last, First, Middle Initial)

Mailing Address 920 Massachusetts Ave NW Ste 1001

City Washington State DC Zip Code 20001-4771

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

Name of Employer Heather Podesta & Partners LLC Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 03 / 2012  
**Transaction ID : C19419371**

Amount of Each Receipt this Period  
1000.00

**C. Mason C. Dobb**  
Full Name (Last, First, Middle Initial)

Mailing Address 3013 SW. 363rd St.

City Federal Way State WA Zip Code 98003

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

Name of Employer Victoria Healthcare Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 01 / 2012  
**Transaction ID : C19419364**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Paul T. Kim**

Mailing Address 32 Bow Road

City State Zip Code  
Newton Center MA 02459

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

Name of Employer Occupation  
Foley Hoag, LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012  
**Transaction ID : C19415645**

Amount of Each Receipt this Period  
500.00

**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 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 Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4250.00

**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 8 OF 32
<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)  
**Searchlight Leadership Fund**

**A. Delta Air Lines PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1212 New York Avenue, NW  
 Suite 200  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00104802  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012  
**Transaction ID : C19421070**  
 Amount of Each Receipt this Period  
 2500.00

**B. National Emergency Medicine PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 Executive Circle  
 City Irving State TX Zip Code 75038  
 FEC ID number of contributing federal political committee. **C** C00140061  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012  
**Transaction ID : C19401262**  
 Amount of Each Receipt this Period  
 5000.00

**C. American Express Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 Pennsylvania Ave. NW Suite 650  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00040535  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012  
**Transaction ID : C19421072**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> 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 32
<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Gentiva Health Services Inc. PAC</b>		Date of Receipt
Mailing Address 3350 Riverwood Parkway Suite 1400		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. <b>C</b> C00407080		<b>Transaction ID : C19421064</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Zeneca Inc. PAC</b>		Date of Receipt
Mailing Address 1800 Concord Pike PO Box 15437		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City Wilmington	State DE	Zip Code 19850
FEC ID number of contributing federal political committee. <b>C</b> C00279455		<b>Transaction ID : C19422425</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Abbott Laboratories Employee PAC</b>		Date of Receipt
Mailing Address 100 Abbott Park Road		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City Abbott Park	State IL	Zip Code 60064
FEC ID number of contributing federal political committee. <b>C</b> C00040279		<b>Transaction ID : C19421075</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. International Brotherhood of Boilermakers CAF**

Mailing Address 753 State Avenue  
Suite 565

City Kansas City State KS Zip Code 66101-2511

FEC ID number of contributing federal political committee. **C C00005157**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
05 / 31 / 2012  
**Transaction ID : C19423996**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. National Community Pharmacists Association PAC**

Mailing Address 100 Daingerfield Road

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 17 / 2012  
**Transaction ID : C19415647**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. International Association of Fire Fighters FIREPAC**

Mailing Address 1750 New York Ave, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 10 / 2012  
**Transaction ID : C19408677**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> 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 11 OF 32
<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Sanofi-Aventis U.S. Inc. Employees PAC</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2012 <b>Transaction ID : C19408747</b>
Mailing Address 801 Pennsylvania Avenue NW Suite 725		Amount of Each Receipt this Period 2500.00
City Washington	State DC Zip Code 20004	
FEC ID number of contributing federal political committee. <b>C</b> C00144345		Aggregate Year-to-Date ▼ 2500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. United Food &amp; Commercial Workers Union ABC</b>		Date of Receipt MM / DD / YYYY 05 / 25 / 2012 <b>Transaction ID : C19424648</b>
Mailing Address 1775 K St NW		Amount of Each Receipt this Period 5000.00
City Washington	State DC Zip Code 20006-1228	
FEC ID number of contributing federal political committee. <b>C</b> C00002766		Aggregate Year-to-Date ▼ 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FMC Corporation Good Government Program</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2012 <b>Transaction ID : C19408678</b>
Mailing Address 1101 Pennsylvania Avenue, NW Suite 325		Amount of Each Receipt this Period 1000.00
City Washington	State DC Zip Code 20004	
FEC ID number of contributing federal political committee. <b>C</b> C00033704		Aggregate Year-to-Date ▼ 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	43500.00

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Joshua Alcorn**

Mailing Address 1449 A Street NE  
Apt. D

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : D509450**

Amount of Each Disbursement this Period

2428.41

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 401 N Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

**Transaction ID : D510430**

Amount of Each Disbursement this Period

60.21

Full Name (Last, First, Middle Initial)

**C. Joshua Alcorn**

Mailing Address 1449 A Street NE  
Apt. D

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Reimbursement- Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2012

**Transaction ID : D507130**

Amount of Each Disbursement this Period

105.00

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

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

2593.62

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Well & Lighthouse, LLC**

Mailing Address 1724 20th Street, NW  
Suite 302

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Internet Consulting Services & Video Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

**Transaction ID : D508160**

Amount of Each Disbursement this Period

5442.92

Full Name (Last, First, Middle Initial)

**B. Blue State Digital, LLC**

Mailing Address 734 15th Street, NW  
Suite 1200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Internet Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2012

**Transaction ID : D508750**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**C. Sean J. Suter**

Mailing Address 2737 Devenshire Place NW  
#127

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : D509451**

Amount of Each Disbursement this Period

1104.33

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

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

10047.25

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Merchant Service Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2012

**Transaction ID : D510431**

Amount of Each Disbursement this Period

468.10

Full Name (Last, First, Middle Initial)

**B. Jake Perry, LLC**

Mailing Address 1664 Beekman Place, NW  
Unit D

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising Consulting Services & Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2012

**Transaction ID : D507131**

Amount of Each Disbursement this Period

10381.50

Full Name (Last, First, Middle Initial)

**C. Perkins Coie LLP**

Mailing Address 1200 Third Avenue  
Suite 4800

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

**Transaction ID : D508161**

Amount of Each Disbursement this Period

3523.32

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

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

14372.92

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CareFirst**

Mailing Address 840 First Street, NE

City Washington State DC Zip Code 20065

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2012

**Transaction ID : D508751**

Amount of Each Disbursement this Period

2592.00

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement Merchant Service Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2012

**Transaction ID : D510432**

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement Merchant Service Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2012

**Transaction ID : D510433**

Amount of Each Disbursement this Period

7.95

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

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

2607.90

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 401 N Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D507644**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Claude E. Zobel Jr.**

Mailing Address 4115 Blackheath Drive

City Memphis State TN Zip Code 38135

Purpose of Disbursement  
Treasurer Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D510274**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Best Messenger**

Mailing Address PO Box 33122

City Washington State DC Zip Code 20033-0122

Purpose of Disbursement  
Messenger Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D507134**

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)

<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Staples Credit Plan**

Mailing Address P.O. Box 689020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2012

**Transaction ID : D510275**

Amount of Each Disbursement this Period

88.02

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 401 N Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2012

**Transaction ID : D510435**

Amount of Each Disbursement this Period

6.36

Full Name (Last, First, Middle Initial)

**C. Joshua Alcorn**

Mailing Address 1449 A Street NE  
Apt. D

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2012

**Transaction ID : D507645**

Amount of Each Disbursement this Period

2428.41

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

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

2522.79

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. The Hartford**

Mailing Address P.O. Box 2907

City Hartford State CT Zip Code 06104

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

**Transaction ID : D508156**

Amount of Each Disbursement this Period

476.00

Full Name (Last, First, Middle Initial)

**B. Pepco**

Mailing Address 701 9th St NW

City Washington State DC Zip Code 20068-0001

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2012

**Transaction ID : D510276**

Amount of Each Disbursement this Period

69.10

Full Name (Last, First, Middle Initial)

**C. Sean J. Suter**

Mailing Address 2737 Devenshire Place NW  
#127

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2012

**Transaction ID : D507646**

Amount of Each Disbursement this Period

1104.33

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

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

1649.43

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Sean J. Suter**

Mailing Address 2737 Devenshire Place NW  
#127

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Reimbursement- Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2012

**Transaction ID : D508746**

Amount of Each Disbursement this Period

14.00

Full Name (Last, First, Middle Initial)

**B. CareFirst**

Mailing Address 840 First Street, NE

City Washington State DC Zip Code 20065

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2012

**Transaction ID : D510277**

Amount of Each Disbursement this Period

2592.00

Full Name (Last, First, Middle Initial)

**C. Sean J. Suter**

Mailing Address 2737 Devenshire Place NW  
#127

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Reimbursement- Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

**Transaction ID : D507647**

Amount of Each Disbursement this Period

27.00

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

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

2633.00

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 401 N Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D509448**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Sage Payment Solutions**

Mailing Address 1501 Farm Credit Dr  
Ste 1500

City McLean State VA Zip Code 22102-5007

Purpose of Disbursement  
Merchant Service Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D506778**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 401 N Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510429**

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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. United Parcel Service**

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

Transaction ID : D508159

Amount of Each Disbursement this Period

104.77

Full Name (Last, First, Middle Initial)

**B. Rebecca Jolley**

Mailing Address 12025 La Palmera

City Las Vegas State NV Zip Code 89138

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2012

Transaction ID : D508749

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2012

Transaction ID : D506749

Amount of Each Disbursement this Period

12444.63

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

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

22549.40

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Membership Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D506750**

Amount of Each Disbursement this Period

1	3	5	0	0
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Halcyon**

Mailing Address 500 South Tyron

City Charlotte State NC Zip Code 28205

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D506760**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 537104

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D506751**

Amount of Each Disbursement this Period

1	1	2	6	0
---	---	---	---	---

**[MEMO ITEM]**

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

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

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 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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Hertz**

Mailing Address 5715 W. Sahara

City Las Vegas State NV Zip Code 89146

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D506761**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Rosewood Crescent Hotel**

Mailing Address 400 Crescent Ct

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D506752**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address PO Box 1501

City Winston Salem State NC Zip Code 27102-1501

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D506762**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Nobu**

Mailing Address 4455 Paradise Rd

City Las Vegas State NV Zip Code 89169-6574

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2012

**Transaction ID : D506753**

Amount of Each Disbursement this Period

633.39
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Lucky Limousine**

Mailing Address 4195 W Diablo Dr

City Las Vegas State NV Zip Code 89118-2357

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2012

**Transaction ID : D506754**

Amount of Each Disbursement this Period

1032.40
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Tickets.com**

Mailing Address P.O. Box 6266

City Concord State CA Zip Code 94524

Purpose of Disbursement  
Tickets for Fundraising Event

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2012

**Transaction ID : D506757**

Amount of Each Disbursement this Period

4220.00
---------

**[MEMO ITEM]**

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Bellagio Hotel**

Mailing Address 3600 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-4303

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2012

**Transaction ID : D506758**

Amount of Each Disbursement this Period

3624.63

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

**Transaction ID : D506792**

Amount of Each Disbursement this Period

2411.70

Full Name (Last, First, Middle Initial)

**C. Beverly Hilton**

Mailing Address 9876 Wilshire Blvd

City Beverly Hills State CA Zip Code 90210-3115

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2012

**Transaction ID : D506793**

Amount of Each Disbursement this Period

2411.70

[MEMO ITEM]

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

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

2411.70

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D508479

Amount of Each Disbursement this Period

187.09

Full Name (Last, First, Middle Initial)

**B. Airtran**

Mailing Address 800 Phoenix Blvd Suite 104

City Atlanta State GA Zip Code 30349

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D508480

Amount of Each Disbursement this Period

175.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D508481

Amount of Each Disbursement this Period

11.59

[MEMO ITEM]

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

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

187.09

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2012

**Transaction ID : D508747**

Amount of Each Disbursement this Period

562.45
--------

Full Name (Last, First, Middle Initial)

**B. Beverly Hilton**

Mailing Address 9876 Wilshire Blvd

City Beverly Hills State CA Zip Code 90210-3115

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2012

**Transaction ID : D508748**

Amount of Each Disbursement this Period

562.45
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2012

**Transaction ID : D509098**

Amount of Each Disbursement this Period

28418.60
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

28981.05
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2012

Transaction ID : D509100

Amount of Each Disbursement this Period

242.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address PO Box 1501

City Winston Salem State NC Zip Code 27102-1501

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2012

Transaction ID : D509110

Amount of Each Disbursement this Period

281.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 537104

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2012

Transaction ID : D509101

Amount of Each Disbursement this Period

112.52

[MEMO ITEM]

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

0.00

**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 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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Bellagio Hotel**

Mailing Address 3600 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-4303

Purpose of Disbursement  
Catering & Room Rental

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
0	5			2	4			2	0	1	2		

**Transaction ID : D509102**

Amount of Each Disbursement this Period

2	1	7	4	8	.	2	8
---	---	---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Charlie Palmer Steak**

Mailing Address 101 Constitution Avenue, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Catering

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
0	5			2	4			2	0	1	2		

**Transaction ID : D509104**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Vdara Condo Hotel**

Mailing Address 2600 W Harmon Avenue

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement  
Travel

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
0	5			2	4			2	0	1	2		

**Transaction ID : D509115**

Amount of Each Disbursement this Period

3	7	2	.	0	4
---	---	---	---	---	---

**[MEMO ITEM]**

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

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

0	0	0	.	0	0
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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 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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Montrose Travel**

Mailing Address 2355 Honolulu Ave

City Montrose State CA Zip Code 91020

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	2

**Transaction ID : D509106**

Amount of Each Disbursement this Period

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

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Washington Nationals Stadium, LLC**

Mailing Address 1500 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Tickets and Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	2

**Transaction ID : D509116**

Amount of Each Disbursement this Period

1	4	8	.	4	8
---	---	---	---	---	---

**[MEMO ITEM]**

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

M	M	/	D	D	/	Y	Y	Y	Y

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)..... ▶

0	.	0	0
---	---	---	---

9	5	3	2	.	3	8
---	---	---	---	---	---	---

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Pascrell For Congress**

Mailing Address P.O. Box 640

City Totowa State NJ Zip Code 07511

Purpose of Disbursement  
Contribution

Candidate Name

**William Pascrell**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : D508150**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Duckworth For Congress**

Mailing Address P.O. Box 8867

City Rolling Meadows State IL Zip Code 60008

Purpose of Disbursement  
Contribution

Candidate Name

**Tammy L Duckworth**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 22 / 2012

**Transaction ID : D508754**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

6000.00

6000.00

