



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Pioneer Political Action Committee

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="128899.89"/>	<input type="text" value="128899.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="89699.46"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="30250.0"/>	<input type="text" value="182900.0"/>
(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="119949.46"/>	<input type="text" value="311799.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15542.25"/>	<input type="text" value="207392.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="104407.21"/>	<input type="text" value="104407.21"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.0"/>	

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)

Page 3

Write or Type Committee Name

**Pioneer Political Action Committee**

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).....	11500.0	25500.0
(ii) Unitemized .....	250.0	400.0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11750.0	25900.0
(b) Political Party Committees .....	0.0	0.0
(c) Other Political Committees (such as PACs).....	18500.0	157000.0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	30250.0	182900.0
12. Transfers From Affiliated/Other Party Committees.....	0.0	0.0
13. All Loans Received .....	0.0	0.0
14. Loan Repayments Received.....	0.0	0.0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.0	0.0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.0	0.0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.0	0.0
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))..... ▶	30250.0	182900.0
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30250.0	182900.0

**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 .....	7.0	54745.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7.0	54745.38
22. Transfers to Affiliated/Other Party Committees.....	0.0	0.0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15535.25	143647.3
24. Independent Expenditures (use Schedule E) .....	0.0	0.0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.0	0.0
26. Loan Repayments Made.....	0.0	0.0
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.0	0.0
(b) Political Party Committees .....	0.0	0.0
(c) Other Political Committees (such as PACs).....	0.0	0.0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.0	0.0
29. Other Disbursements .....	0.0	9000.0
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)) ..	15542.25	207392.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15542.25	207392.68

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	30250.0	182900.0
34. Total Contribution Refunds (from Line 28(d)) .....	0.0	0.0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30250.0	182900.0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7.0	54745.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.0	0.0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7.0	54745.38

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

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

NAME OF COMMITTEE (In Full)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Frederick H Graefe</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 <b>Transaction ID : 1345057701250</b>
Mailing Address 319 Constitution Avenue, NE		Amount of Each Receipt this Period 6500.00
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Law Offices of Frederick H Graefe	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.0	

Full Name (Last, First, Middle Initial) <b>B. Jennifer Higgins</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 <b>Transaction ID : 1345057638032</b>
Mailing Address 305 S. Payne St. No. 306		Amount of Each Receipt this Period 1000.00
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Capitol Health Group, LLC	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.0	

Full Name (Last, First, Middle Initial) <b>C. Leslie H. Wexner</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 <b>Transaction ID : 1345057210610</b>
Mailing Address 3 Limited Parkway		Amount of Each Receipt this Period 5000.00
City Columbus	State OH	Zip Code 43230
FEC ID number of contributing federal political committee. C	Check	
Name of Employer The Limited	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<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: PAGE 7 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Pioneer Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Abigail S. Wexner**

Mailing Address 1 White Barn Lane

City State Zip Code  
New Albany OH 43054

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

Name of Employer Occupation  
self self employed

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2012  
**Transaction ID : 1345057252719**

Amount of Each Receipt this Period  
5000.0

Check

**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).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11500.00

**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 13
<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)  
**Pioneer Political Action Committee**

**A. AA Homecare PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 625 Slaters Lane , Suite 200

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00357129

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.0

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : 1345057557641**

Amount of Each Receipt this Period  
2500.0

Check

**B. AmerisourceBergen Corporation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1300 Morris Drive Suite 100

City Chesterbrook	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.0

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : 1345057356438**

Amount of Each Receipt this Period  
2500.0

Check

**C. Buckeye Patriot Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 2525 North Limestone Street Suite 103

City Springfield	State OH	Zip Code 45503
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FEC ID number of contributing federal political committee. **C** C00239905

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.0

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : 1345057392719**

Amount of Each Receipt this Period  
1000.0

Check

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<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 13
<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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Nationwide Mutual Insurance Co. PAC</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 <b>Transaction ID : 1345057129985</b>
Mailing Address 1 Nationwide Plaza		Amount of Each Receipt this Period 2500.0
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee.	C C00076174	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	

Full Name (Last, First, Middle Initial) <b>B. Real Estate Investment Trusts PAC</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 <b>Transaction ID : 1345057749188</b>
Mailing Address 1875 I Street NW Suite 600		Amount of Each Receipt this Period 5000.0
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee.	C C00182022	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	

Full Name (Last, First, Middle Initial) <b>C. The Huntington Bancshares Inc. PAC</b>		Date of Receipt MM / DD / YYYY 07 / 26 / 2012 <b>Transaction ID : 1345056350375</b>
Mailing Address 41 South High Street		Amount of Each Receipt this Period 2500.0
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee.	C C00165589	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.0	

<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: PAGE 10 OF 13  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Pioneer Political Action Committee**

**A. VGM PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 2817  
 City Waterloo State IA Zip Code 50704--281  
 FEC ID number of contributing federal political committee. **C** C00402545  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.0

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2012  
**Transaction ID : 1345057471672**  
 Amount of Each Receipt this Period  
 2500.0  
 Check

**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).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18500.00

**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 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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Acqua al 2**

Mailing Address 212 7th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Inkind

011

Candidate Name

**Thomas Reed**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 29

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	1	2		

**Transaction ID : 1348152988583**

Amount of Each Disbursement this Period

4	6	4	.	7	5
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**[MEMO ITEM]**

PAC food and beverage in-kind; paid for in reimbursement to Chris Zeigler on 08/02/2012

Full Name (Last, First, Middle Initial)

**B. Acqua al 2**

Mailing Address 212 7th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Inkind

011

Candidate Name

**Diane Black**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	1	2		

**Transaction ID : 1348153091411**

Amount of Each Disbursement this Period

4	6	4	.	7	5
---	---	---	---	---	---

**[MEMO ITEM]**

PAC food and beverage in-kind; paid for in reimbursement to Chris Zeigler on 08/02/2012

Full Name (Last, First, Middle Initial)

**C. Bobby Schilling for Congress**

Mailing Address 367 Avenue of the Cities  
Suite D

City East Moline State IL Zip Code 61244

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Robert Schilling**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : 1345056573235**

Amount of Each Disbursement this Period

2	5	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2	5	0	.	0	0
---	---	---	---	---	---

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

2	5	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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cassis for Congress**

Mailing Address 46350 Grand River Avenue  
Suite A

City State Zip Code  
Novi MI 48374

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Nancy Cassis**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2012

Transaction ID : 1345057027125

Amount of Each Disbursement this Period

5000.0

Full Name (Last, First, Middle Initial)

**B. Chuck Fleischmann for Congress Committee**

Mailing Address P.O. Box 11901

City State Zip Code  
Chattanooga TN 37401

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Charles Fleischmann**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TN District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2012

Transaction ID : 1345056437032

Amount of Each Disbursement this Period

2500.0

Full Name (Last, First, Middle Initial)

**C. Diane Black for Congress**

Mailing Address 819 Plantation Blvd.

City State Zip Code  
Gallatin TN 37066

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Diane Black**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2012

Transaction ID : 1345056802407

Amount of Each Disbursement this Period

2535.25

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

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

10035.25

**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 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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Duffy for Congress**

Mailing Address P.O. Box 186

City Ashland State WI Zip Code 54806

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name  
**Sean Duffy**

Office Sought:  House  
 Senate  
 President  
State: WI District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2012

Transaction ID : 1345056719563

Amount of Each Disbursement this Period

3000.0

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

3000.00

15535.25