

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
America's Leadership PAC

ADDRESS (number and street) 607 14th Street, NW, Suite 800  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00375584  
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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 06 30 2009

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 Tim Kaltenbach

Signature of Treasurer Electronically Filed by Tim Kaltenbach Date 07 31 2009

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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**FEC FORM 3X**  
(Rev. 12/2004)

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

Write or Type Committee Name  
America's Leadership PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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		58747.29
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	58747.29									
(c) Total Receipts (from Line 19) .....	119950.00	119950.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	178697.29	178697.29								
7. Total Disbursements (from Line 31) .....	110248.64	110248.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	68448.65	68448.65								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
America's Leadership PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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) .....	31750.00	31750.00
(ii) Unitemized .....	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	31950.00	31950.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	83000.00	83000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	114950.00	114950.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	5000.00	5000.00
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)) .....	119950.00	119950.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	119950.00	119950.00

**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.....	32248.64	32248.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	32248.64	32248.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68000.00	68000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	10000.00	10000.00
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))..	110248.64	110248.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110248.64	110248.64

**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) .....	114950.00	114950.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	114950.00	114950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32248.64	32248.64
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32248.64	32248.64

**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 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Timothy J. Eckels

Mailing Address 25654 Island Lake Drive

City State Zip Code  
Novi MI 48374

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

Name of Employer Trinity Health Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2009

**Transaction ID: C348**

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Marilyn R. Lieber

Mailing Address 2113 Butternut Drive

City State Zip Code  
Okemos MI 48864

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

Name of Employer Michigan Fitness Foundation Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2009

**Transaction ID: C349**

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert F. Casalou

Mailing Address 26462 Glenwood Drive

City State Zip Code  
Novi MI 48374

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

Name of Employer St. John Providence Park Hospital Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2009

**Transaction ID: C346**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1000.00**

**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 / 39  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.**

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

Mailing Address 5625 Saddle Club Drive

City State Zip Code  
Kalamazoo MI 49009

FEC ID number of contributing federal political committee. C

Name of Employer NanoMed Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 29 / 2009

**Transaction ID:** C369

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
John M. Dunn

Mailing Address 1201 Short Road

City State Zip Code  
Kalamazoo MI 49008

FEC ID number of contributing federal political committee. C

Name of Employer Western Michigan University Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 29 / 2009

**Transaction ID:** C370

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Leon D. Black

Mailing Address 760 Park Avenue

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. C

Name of Employer Apollo Management Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 16 / 2009

**Transaction ID:** C323

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 6500.00

**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 8 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial) Martin Mitchell		Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Mailing Address 551 Maple Knoll		<b>Transaction ID:</b> C331
City Coldwater	State MI	Zip Code 49036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Starr Commonwealth	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Kenneth J. Matzick		Date of Receipt MM / DD / YYYY 05 / 29 / 2009
Mailing Address 22500 Lavon		<b>Transaction ID:</b> C342
City St Clair Shores	State MI	Zip Code 48081
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Beaumont Hospital	Occupation President & Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Trish Knight		Date of Receipt MM / DD / YYYY 06 / 29 / 2009
Mailing Address 132 Eastman Court		<b>Transaction ID:</b> C366
City Marshall	State MI	Zip Code 49068
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<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 9 / 39  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dale R. Tahtinen</p> <p>Mailing Address 1400 Townsend Drive</p> <p>City State Zip Code Houghton MI 49931</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Michigan Tech University Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 29 / 2009</span></p> <p><b>Transaction ID:</b> C351</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Marcia M. Brogan</p> <p>Mailing Address 325 South Old Woodward Avenue</p> <p>City State Zip Code Birmingham MI 48009</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Brogan &amp; Partners Managing Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 29 / 2009</span></p> <p><b>Transaction ID:</b> C353</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Paul A. Ormond</p> <p>Mailing Address 2420 Underhill Road</p> <p>City State Zip Code Toledo OH 43615</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation HRC Manor Care, Inc. Chief Executive Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 26 / 2009</span></p> <p><b>Transaction ID:</b> C333</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">6000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 39  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Anne Marie Mervenne

Mailing Address 1316 South Main Street

City State Zip Code  
Royal Oak MI 48067

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

Name of Employer Occupation  
Mervenne and Associates Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2009

**Transaction ID: C355**

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Anthony F. Earley, Jr.

Mailing Address 5000 Brookdale Road

City State Zip Code  
Bloomfield Hills MI 48304

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

Name of Employer Occupation  
DTE Energy Chairman & Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2009

**Transaction ID: C334**

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph M. Stewart

Mailing Address 1075 Capital Avenue, SW

City State Zip Code  
Battle Creek MI 49015

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

Name of Employer Occupation  
W.K. Kellogg Foundation Board Member

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2009

**Transaction ID: C365**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 39  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Tyrone D. Sanders, Jr.

Mailing Address 17320 Madison

City State Zip Code  
Southfield MI 48076

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

Name of Employer Public Affairs Associates Occupation Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2009

**Transaction ID:** C372

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Bruce B. Ashley

Mailing Address 3894 Highwood Place

City State Zip Code  
Okemos MI 48864

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

Name of Employer Public Affairs Associates Occupation Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2009

**Transaction ID:** C373

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Lisa Nocerini

Mailing Address 9212 Coriander Way

City State Zip Code  
Brighton MI 48116

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

Name of Employer Strategic Federal Affairs Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2009

**Transaction ID:** C352

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert G. Riney

Mailing Address 45989 Tournament Drive

City Northville State MI Zip Code 48168

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

Name of Employer Henry Ford Health System Occupation Executive Vice President & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2009

Transaction ID: C357

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Gerald M. Anderson

Mailing Address 191 Orchard Hills Court

City Ann Arbor State MI Zip Code 48104

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

Name of Employer DTE Energy Occupation President & Chief Operating Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2009

Transaction ID: C332

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
George A. Franklin

Mailing Address 2010 Hudson Street

City Kalamazoo State MI Zip Code 49008

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

Name of Employer Self Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 29 / 2009

Transaction ID: C367

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<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)  
America's Leadership PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel G. Hale		Date of Receipt MM / DD / YYYY 05 / 29 / 2009		
	Mailing Address 44100 Deep Hollow Court		<b>Transaction ID:</b> C347		
	City Northville	State MI	Zip Code 48168	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Trinity Health	Occupation Executive Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) James R. Ryan		Date of Receipt MM / DD / YYYY 06 / 29 / 2009		
	Mailing Address 600 W. Shiawassee		<b>Transaction ID:</b> C371		
	City Lansing	State MI	Zip Code 48933	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Public Affairs Associates	Occupation Government Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph R. Swedish		Date of Receipt MM / DD / YYYY 05 / 29 / 2009		
	Mailing Address 50767 Drakes Bay Drive		<b>Transaction ID:</b> C345		
	City Novi	State MI	Zip Code 48374	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Trinity Health	Occupation President & Chief Executive Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<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 14 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy M. Schlichting		Date of Receipt MM / DD / YYYY 06 / 12 / 2009		
	Mailing Address 1710 Orchard Lane		<b>Transaction ID:</b> C359		
	City Bloomfield Hills	State MI	Zip Code 48301	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Henry Ford Health System	Occupation President & Chief Executive Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy J. Moody		Date of Receipt MM / DD / YYYY 05 / 28 / 2009		
	Mailing Address 1078 Applegate Lane		<b>Transaction ID:</b> C338		
	City East Lansing	State MI	Zip Code 48823	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer DTE Energy	Occupation Director, State Government Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Glenn D. Mroz		Date of Receipt MM / DD / YYYY 05 / 29 / 2009		
	Mailing Address 18970 Canal Road		<b>Transaction ID:</b> C350		
	City Houghton	State MI	Zip Code 49931	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Michigan Tech University	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 15 / 39  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jon L. Stryker

Mailing Address P.O. Box 51536

City State Zip Code  
Kalamazoo MI 49005

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

Name of Employer Occupation  
Jon Stryker Architecture President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2009

**Transaction ID: C326**

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas J. Hoisington

Mailing Address One Michigan Avenue Building  
120 N. Washington Sq., Suite 1050

City State Zip Code  
Lansing MI 48933

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

Name of Employer Occupation  
Public Affairs Associates Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2009

**Transaction ID: C374**

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
John W. Brown

Mailing Address 6464 Liteolier

City State Zip Code  
Portage MI 49024

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

Name of Employer Occupation  
Stryker Corporation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2009

**Transaction ID: C329**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 16 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Herman B. Gray, Jr.	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 5399 West Bloomfield Lake Road	<b>Transaction ID:</b> C356
	City State Zip Code West Bloomfield MI 48323	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Children's Hospital of Michigan Occupation: Chief of Staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen M. Shivinsky	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 39283 Heatherbrook Drive	<b>Transaction ID:</b> C361
	City State Zip Code Farmington Hills MI 48331	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Trinity Health Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kedrick D. Adkins, Jr.	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address 1173 Copperwood Drive	<b>Transaction ID:</b> C344
	City State Zip Code Bloomfield Hills MI 48302	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Trinity Health Occupation: President, Integrated Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	31750.00



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

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

FOR LINE NUMBER: PAGE 17 / 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
DTE Energy Company Political Action Committee  
Mailing Address 2000 Second Avenue  
City Detroit State MI Zip Code 48226  
FEC ID number of contributing federal political committee. **C** C00081547  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 05 / 27 / 2009  
Transaction ID: C335  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Sun Healthcare Group, Inc. Political Action Committee  
Mailing Address 101 Sun Avenue NE  
City Albuquerque State NM Zip Code 87109  
FEC ID number of contributing federal political committee. **C** C00398826  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 06 / 19 / 2009  
Transaction ID: C362  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Internat'l Union of Operating Engineers Local 324 National PAC  
Mailing Address 37450 Schoolcraft, Suite 110  
City Livonia State MI Zip Code 48150  
FEC ID number of contributing federal political committee. **C** C00093989  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 03 / 31 / 2009  
Transaction ID: C321  
Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8000.00  
**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 18 / 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Sheet Metal Workers' International Association Political Action League

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

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
0	1	/	2	2	/	2	0	0	9

**Transaction ID:** C311

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mylan, Inc. PAC

Mailing Address 1500 Corporate Drive Suite 400

City State Zip Code  
Canonsburg PA 15317

FEC ID number of contributing federal political committee. **C** C00332395

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
0	3	/	1	0	/	2	0	0	9

**Transaction ID:** C317

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
American Association of Nurse Anesthetists Separate Segregated Fund

Mailing Address 222 South Prospect Avenue

City State Zip Code  
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	9

**Transaction ID:** C341

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
CMS Energy Corporation Employees for Better Government-Federal

Mailing Address One Energy Plaza  
EP8-267

City State Zip Code  
Jackson MI 49201

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	9

**Transaction ID:** C340

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
K&L Gates, LLP Political Action Committee

Mailing Address 1601 K Street, NW  
Suite 500

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	9

**Transaction ID:** C358

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
International Brotherhood of Electrical Workers COPE

Mailing Address 900 Seventh Street, NW

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID:** C310

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

**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 20 / 39  
(check only one)

<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)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
American Society of Anesthesiologists Political Action Committee

Mailing Address 520 North Northwest Highway

City State Zip Code  
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

**Transaction ID:** C325

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Blue Cross & Blue Shield Of Michigan PAC

Mailing Address 602 West Ionia Street  
B-102

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00084061

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 10 / 2009

**Transaction ID:** C316

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Wine & Spirits Wholesalers of America Political Action Committee

Mailing Address 805 15th Street, NW  
Suite 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 10 / 2009

**Transaction ID:** C315

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

**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 21 / 39

(check only one)

<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)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Health Alliance Plan PAC

Mailing Address 2850 West Grand Boulevard

City State Zip Code  
Detroit MI 48202

FEC ID number of contributing federal political committee. **C** C00410670

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 9

Transaction ID: C337

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 2 / 2 0 0 9

Transaction ID: C339

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
American Medical Association PAC

Mailing Address 25 Massachusetts Avenue, NW  
Suite 600

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00000422

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  
0 5 / 2 1 / 2 0 0 9

Transaction ID: C327

Amount of Each Receipt this Period

5000.00

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

6500.00

**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 22 / 39  
(check only one)

<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)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial)  
UAW-V-CAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code  
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 29 / 2009

**Transaction ID:** C312

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
DaVita, Inc. Political Action Committee

Mailing Address 601 Hawaii Street

City State Zip Code  
El Segundo CA 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2009

**Transaction ID:** C318

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
United Steelworkers Political Action Fund

Mailing Address Five Gateway Center

City State Zip Code  
Pittsburgh PA 15222

FEC ID number of contributing federal political committee. **C** C00003590

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2009

**Transaction ID:** C314

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 23 / 39</span>
	(check only one)
	<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)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 31 / 2009  
**Transaction ID: C319**  
 Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
mCapitol Management/MWH Americas PAC

Mailing Address 380 Interlocken Crescent, Suite 20

City Broomfield State CO Zip Code 80021

FEC ID number of contributing federal political committee. **C** C00242370

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 06 / 29 / 2009  
**Transaction ID: C375**  
 Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Dykema Gossett Federal PAC

Mailing Address 201 Townsend Street Suite 900

City Lansing State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 01 / 2009  
**Transaction ID: C336**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

**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 24 / 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

**A.** Full Name (Last, First, Middle Initial)  
Home Depot, Inc. Political Action Committee

Mailing Address 101 Constitution Avenue, NW  
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

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  
 0 3 / 3 1 / 2 0 0 9

**Transaction ID:** C322

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Automobile Club of Michigan Political Action Committee

Mailing Address 1 Auto Club Drive

City Dearborn State MI Zip Code 48126

FEC ID number of contributing federal political committee. **C** C00197103

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 1 / 2 0 0 9

**Transaction ID:** C328

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Real Estate Roundtable Political Action Committee

Mailing Address 801 Pennsylvania Avenue  
Suite 720

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033779

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  
 0 6 / 1 6 / 2 0 0 9

**Transaction ID:** C360

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

**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 25 / 39  
(check only one)

<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)  
America's Leadership PAC

**A.**

Full Name (Last, First, Middle Initial) HCR Manor Care PAC		Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Mailing Address 333 North Summit Street 16th Floor		<b>Transaction ID:</b> C330
City Toledo	State OH	Zip Code 43699
FEC ID number of contributing federal political committee. <b>C</b> C00260141		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) Wal-Mart Stores, Inc. PAC for Responsible Government		Date of Receipt MM / DD / YYYY 03 / 31 / 2009
Mailing Address 702 S.W. 8th Street		<b>Transaction ID:</b> C320
City Bentonville	State AR	Zip Code 72716
FEC ID number of contributing federal political committee. <b>C</b> C00093054		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	83000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 39	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

A.

Full Name (Last, First, Middle Initial) Franken Recount Fund		Date of Receipt
Mailing Address 4190 Vinewood Lane, #111-554		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
City	State	Zip Code
Minneapolis	MN	55442
FEC ID number of contributing federal political committee.		Transaction ID: C324
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		Refund
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

**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 27 / 39

<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)  
America's Leadership PAC

A.	Full Name (Last, First, Middle Initial) Nell Dority	Transaction ID: D310 Date of Disbursement 06 / 04 / 2009
	Mailing Address 908 Pleasant Drive	Amount of Each Disbursement this Period 491.90
	City Ypsilanti State MI Zip Code 48197	
	Purpose of Disbursement Reimbursement - Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) McCamly Plaza Hotel	Transaction ID: D312 Date of Disbursement 06 / 25 / 2009
	Mailing Address 50 Capital Avenue, SW	Amount of Each Disbursement this Period 413.40
	City Battle Creek State MI Zip Code 49017	
	Purpose of Disbursement Catering & Room Rental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D296 Date of Disbursement 02 / 26 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 2006.40
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2911.70
<b>TOTAL</b> 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)  
America's Leadership PAC

A.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D297 Date of Disbursement 03 / 04 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 542.34
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D307 Date of Disbursement 05 / 01 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 756.37
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D324 Date of Disbursement 06 / 30 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 812.63
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2111.34
<b>TOTAL</b> 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 29 / 39

<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)  
America's Leadership PAC

A.	Full Name (Last, First, Middle Initial) Grand Hotel	Transaction ID: D311 Date of Disbursement 06 / 11 / 2009
	Mailing Address 2177 Commons Parkway	Amount of Each Disbursement this Period 1201.76
	City Mackinac Island State MI Zip Code 49757	
	Purpose of Disbursement Catering	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Adrienne Donato	Transaction ID: D291 Date of Disbursement 02 / 02 / 2009
	Mailing Address 610 6th Street, NE	Amount of Each Disbursement this Period 300.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Reimbursement-Catering	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Adrienne Donato	Transaction ID: D290 Date of Disbursement 02 / 02 / 2009
	Mailing Address 610 6th Street, NE	Amount of Each Disbursement this Period 12000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Consulting Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	13501.76
<b>TOTAL</b> 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)  
America's Leadership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adrienne Donato</p> <p>Mailing Address 610 6th Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Reimbursement-Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D298</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Adrienne Donato</p> <p>Mailing Address 610 6th Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D309</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 120 Maryland Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fax Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D308</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="92.16"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12116.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 31 / 39

<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)  
America's Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
D'Acqua Restaurant

Transaction ID: D299

Date of Disbursement

Mailing Address 801 Pennsylvania Avenue, NW

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	9

City Washington State DC Zip Code 20004

Amount of Each Disbursement this Period

1565.64
---------

Purpose of Disbursement  
Catering

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1565.64
---------

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

32206.60
----------

**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)  
America's Leadership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Citizens for Arlen Specter</p> <p>Mailing Address 236 Massachusetts Avenue NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Arlen Specter</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D322</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Gillibrand for Congress</p> <p>Mailing Address P.O. Box 15734</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D303</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michigan Democratic State Central Comm-Federal Account</p> <p>Mailing Address 606 Townsend</p> <p>City Lansing State MI Zip Code 48933</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Michigan Democratic State Central Comm-Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D305</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Michigan Democratic State Central Comm-Federal Account

Transaction ID: D313  
Date of Disbursement

Mailing Address 606 Townsend

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City Lansing State MI Zip Code 48933

Amount of Each Disbursement this Period

Purpose of Disbursement  
2009 Contribution

2500.00
---------

Candidate Name  
Michigan Democratic State Central Comm-Federal Account

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
HillPAC

Transaction ID: D293  
Date of Disbursement

Mailing Address 1825 K Street, NW Suite 1000

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	0	9

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
2009 Contribution

5000.00
---------

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Friends Of Schumer

Transaction ID: D306  
Date of Disbursement

Mailing Address 509 Madison Avenue Suite 1902

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	9

City New York State NY Zip Code 10022

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

2000.00
---------

Candidate Name  
Charles E. Schumer

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: NY District:

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

9500.00
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hodes for Senate</p> <p>Mailing Address 26 South Main Street #252</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Paul W. Hodes</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D320 <b>Date of Disbursement</b> 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bennet For Colorado</p> <p>Mailing Address 1900 Grant Street Suite 1170</p> <p>City Denver State CO Zip Code 80203</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Michael F. Bennet</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D316 <b>Date of Disbursement</b> 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Levin For Congress</p> <p>Mailing Address P.O. Box 37</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sander M. Levin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D315 <b>Date of Disbursement</b> 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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

12000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Schauer For Congress

Transaction ID: D321  
Date of Disbursement

Mailing Address P.O. Box 100

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code  
Battle Creek MI 49016

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
Mark Schauer

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MI District: 07

B.

Full Name (Last, First, Middle Initial)  
Peters For Congress

Transaction ID: D318  
Date of Disbursement

Mailing Address P.O. Box 226

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code  
Bloomfield Hills MI 48303

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
Gary Peters

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MI District: 09

C.

Full Name (Last, First, Middle Initial)  
Robin Carnahan for Congress

Transaction ID: D300  
Date of Disbursement

Mailing Address P.O. Box 50378

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	9

City State Zip Code  
Saint Louis MO 63105

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
Robin Carnahan

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MO District:

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

10000.00
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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 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)  
America's Leadership PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Feingold Senate Committee</p> <p>Mailing Address P.O. Box 620062</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Russell D. Feingold</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D317 <b>Date of Disbursement</b> 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Byron Dorgan</p> <p>Mailing Address P.O. Box 871</p> <p>City Bismarck State ND Zip Code 58502</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Byron L. Dorgan</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D314 <b>Date of Disbursement</b> 06 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Barbara Boxer</p> <p>Mailing Address P.O. Box 647151</p> <p>City Los Angeles State CA Zip Code 90064</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Barbara Boxer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D302 <b>Date of Disbursement</b> 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
America's Leadership PAC

A.	Full Name (Last, First, Middle Initial) Friends of Chris Dodd	Transaction ID: D319 Date of Disbursement
	Mailing Address P.O. Box 270701	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City West Hartford State CT Zip Code 06127	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Christopher J. Dodd	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: D304 Date of Disbursement
	Mailing Address P.O. Box 3197	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Little Rock State AR Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name Blanche Lambert Lincoln	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee	Transaction ID: D292 Date of Disbursement
	Mailing Address 120 Maryland Avenue, NE	<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement 2009 Contribution	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="22000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="68000.00"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
America's Leadership PAC

A.

Full Name (Last, First, Middle Initial)  
Patrick M. Murphy

Mailing Address 203 3rd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Void of 9/08 Check

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D294  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	9

Amount of Each Disbursement this Period

-500.00
---------

B.

Full Name (Last, First, Middle Initial)  
Patrick M. Murphy

Mailing Address 203 3rd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D295  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	9

Amount of Each Disbursement this Period

500.00
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SUBTOTAL of Disbursements This Page (optional) ..... ▶

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

0.00
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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)

PAGE 39 / 39

<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)  
America's Leadership PAC

A.	Full Name (Last, First, Middle Initial) Franken Recount Fund		Transaction ID: D301 Date of Disbursement																				
	Mailing Address 4190 Vinewood Lane, #111-554		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	3		2	0	0	9														
	City Minneapolis	State MN	Zip Code 55442	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Donation		Category/ Type	10000.00																			
	Candidate Name																						
	Office Sought:	Disbursement For:																					
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State:	District:																					

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

10000.00

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

10000.00