

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 GIPAC

ADDRESS (number and street) 1020 N. Fairfax St. 5th Floor Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER C00354571 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2010 through 08 08 2010

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 Daniel J. Pambianco Signature of Treasurer Electronically Filed by Daniel J. Pambianco Date 08 13 2010

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 FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GIPAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
0	8

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		66708.34
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	63605.15									
(c) Total Receipts (from Line 19)	3250.00	10849.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66855.15	77558.30								
7. Total Disbursements (from Line 31)	2405.75	13108.90								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	64449.40	64449.40								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
GIPAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
0	8

Y	Y	Y	Y
2	0	1	0

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)	3250.00	10249.99
(ii) Unitemized	0.00	599.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3250.00	10849.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3250.00	10849.65
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.31
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))	3250.00	10849.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3250.00	10849.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	155.75	7608.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	155.75	7608.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2250.00	5500.00
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.....	0.00	0.00
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))..	2405.75	13108.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2405.75	13108.90

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)	3250.00	10849.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3250.00	10849.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	155.75	7608.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	155.75	7608.90

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11
(check only one)

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

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

NAME OF COMMITTEE (In Full)
GIPAC

A. Full Name (Last, First, Middle Initial)
Dr. Christopher Barrilleaux

Mailing Address 4833 Antonini Drive

City State Zip Code
Metairie LA 70006

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

Name of Employer Self Employed Occupation
Self Employed Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2010

Transaction ID: A2010-1966966

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. Andrew Gottesman

Mailing Address 6906 Vista Willow Drive

City State Zip Code
Dallas TX 75248

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

Name of Employer Self-Employed Occupation
Self-Employed Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2010

Transaction ID: A2010-1966967

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Maury Morrison

Mailing Address 6014 Bayou Robert Drive

City State Zip Code
Alexandria LA 71301

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

Name of Employer Freedman Clinic Occupation
Freedman Clinic Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2010

Transaction ID: A2010-1912992

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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NAME OF COMMITTEE (In Full)
GIPAC

A. Full Name (Last, First, Middle Initial)
Dr. Daniel Pambianco

Mailing Address 2335 Cinnamon Ridge Road

City State Zip Code
Charlottesville VA 22901

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

Name of Employer: Charlottesville Gastro As-soc. Occupation: Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 19 / 2010
Transaction ID: A2010-1830895
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Michael A. Safdi

Mailing Address 2836 Losantiridge Avenue

City State Zip Code
Cincinnati OH 45213

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

Name of Employer: Ohio GI and Liver Institute Occupation: Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A2010-1830896
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ► 3250.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
GIPAC

A.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B342318 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="07"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Online Processing Fee	<input type="text" value="30.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344841 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="07"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="29.30"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344839 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="07"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="29.30"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GIPAC

A.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344846 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="08"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="30.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344832 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="08"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="14.80"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344828 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="08"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="14.80"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="59.60"/>
TOTAL 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 10 / 11

<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)
GIPAC

A. Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B344831	
	Date of Disbursement 08 / 08 / 2010	
Mailing Address P.O. Box 7022	Amount of Each Disbursement this Period 7.55	
City Mountain View	State CA	Zip Code 94039
Purpose of Disbursement Credit Card Processing Fee	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: CA District:	Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	7.55
TOTAL This Period (last page this line number only)	155.75

**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)
GIPAC

A.	Full Name (Last, First, Middle Initial) Blumenthal for Senate	Transaction ID: B343433 Date of Disbursement
	Mailing Address 777 Summer Street	<input type="text" value="07"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Stamford State CT Zip Code 06901	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="250.00"/>
	Candidate Name Richard Blumenthal	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blumenthal for Senate	Transaction ID: B343434 Date of Disbursement
	Mailing Address 777 Summer Street	<input type="text" value="07"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Stamford State CT Zip Code 06901	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Richard Blumenthal	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Manchin for West Virginia	Transaction ID: B343889 Date of Disbursement
	Mailing Address 426 C Street NE	<input type="text" value="08"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Joseph Manchin	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Primary

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2250.00"/>