

# 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  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

ADDRESS (number and street) 3930 Pender Drive  
Suite 340  
 Check if different than previously reported. (ACC)  
Fairfax VA 20121

2. **FEC IDENTIFICATION NUMBER** C00120030  
**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 07 01 2011 through 07 31 2011

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 Susan Rice

Signature of Treasurer Electronically Filed by Susan Rice Date 07 19 2011

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  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		119346.96
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	168847.91									
(c) Total Receipts (from Line 19) .....	2000.00	112934.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	170847.91	232280.96								
7. Total Disbursements (from Line 31) .....	45566.46	106999.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	125281.45	125281.45								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2000.00	112534.00
(ii) Unitemized .....	0.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2000.00	112934.00
(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) .....	2000.00	112934.00
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.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2000.00	112934.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2000.00	112934.00

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	45500.00	105000.00
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	500.00
(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	500.00
29. Other Disbursements.....	66.46	1499.51
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))..	45566.46	106999.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45566.46	106999.51

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) .....	2000.00	112934.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2000.00	112434.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 16
	<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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Bevers		Date of Receipt MM / DD / YYYY 07 / 01 / 2011		
	Mailing Address 21814 Sheffield Gray		<b>Transaction ID:</b> SA11AI.5284		
	City Cypress	State TX	Zip Code 77433	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Bevers & Co	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Tom Kelso		Date of Receipt MM / DD / YYYY 07 / 18 / 2011		
	Mailing Address 100 S Charles Street Suite 1350		<b>Transaction ID:</b> SA11AI.5262		
	City Baltimore	State MD	Zip Code 21201	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Matrix Capital Markets Group	Occupation Managing Director			
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) Jeffrey W LeBeouf		Date of Receipt MM / DD / YYYY 07 / 15 / 2011		
	Mailing Address 2825 Railroad Avenue		<b>Transaction ID:</b> SA11AI.5261		
	City Ceres	State CA	Zip Code 95307	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer E.R. Vine & Sons	Occupation President			
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) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	2000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

**A.** Full Name (Last, First, Middle Initial)  
ANN MARIE BUERKLE FOR CONGRESS

Mailing Address 3779 UNDERWOOD WAY

City SYRACUSE State NY Zip Code 13215

Purpose of Disbursement  
Contribution

Candidate Name  
ANN MARIE BUERKLE

Office Sought:  House  
 Senate  
 President

State: NY District: 25

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5240

Date of Disbursement

07 / 21 / 2011

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
BUTTERFIELD FOR CONGRESS

Mailing Address PO Box 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement  
Contribution

Candidate Name  
G K BUTTERFIELD

Office Sought:  House  
 Senate  
 President

State: NC District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5229

Date of Disbursement

07 / 19 / 2011

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR TOM PETRI

Mailing Address P.O. BOX 270

City FOND DU LAC State WI Zip Code 54936

Purpose of Disbursement  
Contribution

Candidate Name  
THOMAS PETRI

Office Sought:  House  
 Senate  
 President

State: WI District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5256

Date of Disbursement

07 / 26 / 2011

Amount of Each Disbursement this Period

2000.00

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

6000.00

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

<b>A.</b> Full Name (Last, First, Middle Initial) CLAY JR. FOR CONGRESS Mailing Address PO BOX 4544 City ST. LOUIS State MO Zip Code 63108 Purpose of Disbursement Contribution Candidate Name WILLIAM LACY JR CLAY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5264 Date of Disbursement 07 / 22 / 2011
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) COLE FOR CONGRESS Mailing Address P.O. Box 722256 City Norman State OK Zip Code 73070 Purpose of Disbursement Contribution Candidate Name TOM COLE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 04 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5244 Date of Disbursement 07 / 20 / 2011
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN Mailing Address 18 NORTH SECOND STREET, BOX 37 City SAINT CLAIR State PA Zip Code 17970 Purpose of Disbursement Contribution Candidate Name T. TIMOTHY HOLDEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5248 Date of Disbursement 07 / 15 / 2011
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

6000.00

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF DENNIS CARDOZA</b>  Mailing Address <b>PO BOX 2749</b>  City <b>MERCED</b> State <b>CA</b> Zip Code <b>95340</b> Purpose of Disbursement Contribution Candidate Name <b>DENNIS CARDOZA</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CA</b> District: <b>18</b> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5221 Date of Disbursement M M / D D / Y Y Y Y <b>07 / 18 / 2011</b>	Amount of Each Disbursement this Period 2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF JIM CLYBURN</b>  Mailing Address <b>PO BOX 12567</b>  City <b>COLUMBIA</b> State <b>SC</b> Zip Code <b>29211</b> Purpose of Disbursement Contribution Candidate Name <b>JAMES E. CLYBURN</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>SC</b> District: <b>06</b> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5259 Date of Disbursement M M / D D / Y Y Y Y <b>07 / 26 / 2011</b>	Amount of Each Disbursement this Period 2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>GARDNER FOR CONGRESS</b>  Mailing Address <b>PO BOX 2408</b>  City <b>LOVELAND</b> State <b>CO</b> Zip Code <b>80539</b> Purpose of Disbursement Political Contribution Candidate Name <b>CORY GARDNER</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CO</b> District: <b>04</b> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5222 Date of Disbursement M M / D D / Y Y Y Y <b>07 / 22 / 2011</b>	Amount of Each Disbursement this Period 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<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 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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

**A. GENE GREEN CONGRESSIONAL CAMPAIGN**

Full Name (Last, First, Middle Initial)

GENE GREEN CONGRESSIONAL CAMPAIGN

Mailing Address PO BOX 16128

City HOUSTON State TX Zip Code 77222

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
Gene Green

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TX District: 29

Transaction ID: SB23.5251

Date of Disbursement

07 / 18 / 2011

Amount of Each Disbursement this Period

2000.00

**B. GREGG HARPER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GREGG HARPER FOR CONGRESS

Mailing Address POST OFFICE BOX 54344

City PEARL State MS Zip Code 39288

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
GREGG HARPER

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MS District: 03

Transaction ID: SB23.5282

Date of Disbursement

07 / 07 / 2011

Amount of Each Disbursement this Period

2000.00

**C. JOHN SULLIVAN FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

JOHN SULLIVAN FOR CONGRESS INC

Mailing Address Post Office Box 470840

City Tulsa State OK Zip Code 74147

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
SULLIVAN, JOHN

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OK District: 01

Transaction ID: SB23.5243

Date of Disbursement

07 / 26 / 2011

Amount of Each Disbursement this Period

2000.00

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

6000.00

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A.	Full Name (Last, First, Middle Initial) LEE TERRY FOR CONGRESS	Transaction ID: SB23.5208
	Mailing Address PO Box 540098	Date of Disbursement 07 / 06 / 2011
	City Omaha State NE Zip Code 68154	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name LEE TERRY	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEE TERRY FOR CONGRESS	Transaction ID: SB23.5238
	Mailing Address PO Box 540098	Date of Disbursement 07 / 28 / 2011
	City Omaha State NE Zip Code 68154	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name LEE TERRY	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARK PRYOR FOR US SENATE	Transaction ID: SB23.5271
	Mailing Address PO BOX 2720	Date of Disbursement 07 / 26 / 2011
	City LITTLE ROCK State AR Zip Code 72203	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name MARK L PRYOR	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<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 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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) MARY BONO MACK COMMITTEE</p> <p>Mailing Address PO BOX 3370</p> <p>City PALM SPRINGS State CA Zip Code 92263</p> <p>Purpose of Disbursement Campaign</p> <p>Candidate Name MARY BONO MACK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5214</p> <p>Date of Disbursement 07 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MIKE MCINTYRE FOR CONGRESS</p> <p>Mailing Address P.O. BOX 1</p> <p>City LUMBERTON State NC Zip Code 28359</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name MIKE REP. MCINTYRE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5231</p> <p>Date of Disbursement 07 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type 011</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MIKE ROGERS FOR CONGRESS</p> <p>Mailing Address 123 EAST 13TH STREET</p> <p>City Anniston State AL Zip Code 36201</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name MICHAEL ROGERS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5207</p> <p>Date of Disbursement 07 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 011</p>

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

4000.00

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

<b>A.</b> Full Name (Last, First, Middle Initial) MIKE ROSS FOR CONGRESS COMMITTEE Mailing Address PO BOX 360 City PRESCOTT State AR Zip Code 71857 Purpose of Disbursement Contribution Candidate Name MICHAEL AVERY ROSS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5277 Date of Disbursement 07 / 05 / 2011
	Amount of Each Disbursement this Period 1500.00 Category/Type: 011
<b>B.</b> Full Name (Last, First, Middle Initial) MIKE ROSS FOR CONGRESS COMMITTEE Mailing Address PO Box 360 City Prescott State AR Zip Code 71857 Purpose of Disbursement Contribution Candidate Name MICHAEL AVERY ROSS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5280 Date of Disbursement 07 / 05 / 2011
	Amount of Each Disbursement this Period 2500.00 Category/Type: 011
<b>C.</b> Full Name (Last, First, Middle Initial) POMPEO FOR CONGRESS INC Mailing Address PO BOX 780146 City WICHITA State KS Zip Code 67212 Purpose of Disbursement Contribution Candidate Name MICHAEL RICHARD POMPEO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04 Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5269 Date of Disbursement 07 / 19 / 2011
	Amount of Each Disbursement this Period 2000.00 Category/Type: 011

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

6000.00

**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)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A.	Full Name (Last, First, Middle Initial) SCALISE FOR CONGRESS	Transaction ID: SB23.5223 Date of Disbursement 07 / 21 / 2011
	Mailing Address PO BOX 23219	
	City JEFFERSON State LA Zip Code 70183	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name STEVE MR. SCALISE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) WALTER JONES COMMITTEE	Transaction ID: SB23.5218 Date of Disbursement 07 / 18 / 2011
	Mailing Address PO BOX 3962	
	City GREENVILLE State NC Zip Code 27836	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name WALTER B. JONES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03	011 Category/ Type
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) WALTER JONES COMMITTEE	Transaction ID: SB23.5236 Date of Disbursement 07 / 18 / 2011
	Mailing Address PO BOX 3962	
	City GREENVILLE State NC Zip Code 27836	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name WALTER B. JONES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**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)

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<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)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A.

Full Name (Last, First, Middle Initial)

WHITEHOUSE FOR SENATE

Mailing Address P.O. BOX 40280

City  
PROVIDENCE

State  
RI

Zip Code  
02940

Purpose of Disbursement  
Contribution

Candidate Name  
SHELDON II WHITEHOUSE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: RI District: 00

Transaction ID: SB23.5210

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<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)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

**A.** Full Name (Last, First, Middle Initial)  
American Express Establishment Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85702

Purpose of Disbursement

Service Charge  
Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.5276

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Wachovia Bank

Mailing Address PO Box 563966

City Charlotte State NC Zip Code 28256

Purpose of Disbursement

Bank Charges  
Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.5268

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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