

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
We the People PAC

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  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 (12S)  
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  /  /  through  /  /

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 Ken Weinstein

Signature of Treasurer Ken Weinstein [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**We the People PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="25099.43"/>	<input type="text" value="25099.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18134.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7200.00"/>	<input type="text" value="103051.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="25334.44"/>	<input type="text" value="128150.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4947.38"/>	<input type="text" value="107763.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20387.06"/>	<input type="text" value="20387.06"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**We the People PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 07 / 31 / 2012

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).....	3600.00	37301.00
(ii) Unitemized .....	0.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3600.00	37701.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3600.00	65350.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7200.00	103051.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7200.00	103051.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7200.00	103051.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3947.38	17763.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3947.38	17763.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	83000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 .....	1000.00	7000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4947.38	107763.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4947.38	107763.37

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7200.00	103051.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7200.00	103051.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3947.38	17763.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3947.38	17763.37

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
<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)  
**We the People PAC**

Full Name (Last, First, Middle Initial) <b>A. Lauren Randall Buckley</b>		Date of Receipt MM / DD / YYYY 07 / 30 / 2012 <b>Transaction ID : C8632624</b>
Mailing Address 422 N Park Dr		Amount of Each Receipt this Period 100.00
City Arlington	State VA	Zip Code 22203
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation Associate Director, Federal Government	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. Steven Champlin</b>		Date of Receipt MM / DD / YYYY 07 / 16 / 2012 <b>Transaction ID : C8604518</b>
Mailing Address 4800 Dexter St., NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		
Name of Employer The Duberstein Group	Occupation Senior VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mark I. Solomon</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2012 <b>Transaction ID : C8604516</b>
Mailing Address 429 Dove Lake Rd.		Amount of Each Receipt this Period 2500.00
City Gladwyne	State PA	Zip Code 19035
FEC ID number of contributing federal political committee. C		
Name of Employer CMS Companies	Occupation Chariman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3600.00

**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 7 OF 18
<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)  
**We the People PAC**

**A. Allyson Schwartz for Congress**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2232

City Jenkintown	State PA	Zip Code 19046
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FEC ID number of contributing federal political committee. **C** C00389197

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2012

**Transaction ID : C8636207**

Amount of Each Receipt this Period  
50.00

\* In-Kind: Administrative Services

**B. Allyson Schwartz for Congress**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2232

City Jenkintown	State PA	Zip Code 19046
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FEC ID number of contributing federal political committee. **C** C00389197

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

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

**Transaction ID : C8636205**

Amount of Each Receipt this Period  
50.00

\* In-Kind: Administrative Services

**C. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2012

**Transaction ID : C8604513**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<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 8 OF 18
<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)  
**We the People PAC**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-</b>		Date of Receipt
Mailing Address 8515 Georgia Ave Suite 400		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code Silver Spring MD 20910		<b>Transaction ID : C8635073</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00017525"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * Conduit contribution for Suzanne Bonamici for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-</b>		Date of Receipt
Mailing Address 8515 Georgia Ave Suite 400		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City State Zip Code Silver Spring MD 20910		<b>Transaction ID : C8635076</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00017525"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * Conduit contribution for Friends of Dan Maffei
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-</b>		Date of Receipt
Mailing Address 8515 Georgia Ave Suite 400		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City State Zip Code Silver Spring MD 20910		<b>Transaction ID : C8635077</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00017525"/>		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * Conduit contribution for Pallone for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="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 9 OF 18
<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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

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

**Transaction ID : C8635080**

Amount of Each Receipt this Period  

2500.00
---------

**[MEMO ITEM]**  
\* Conduit contribution for Horsford for Congress

Full Name (Last, First, Middle Initial)  
**B. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

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

**Transaction ID : C8635083**

Amount of Each Receipt this Period  

3000.00
---------

**[MEMO ITEM]**  
\* Conduit contribution for Conyers for Congress

Full Name (Last, First, Middle Initial)  
**C. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  

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

**Transaction ID : C8635085**

Amount of Each Receipt this Period  

1000.00
---------

**[MEMO ITEM]**  
\* Conduit contribution for Duckworth for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 10 OF 18
<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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C8635086**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
 \* Conduit contribution for Lucille Roybal-Allard for Congress

Full Name (Last, First, Middle Initial)  
**B. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C8635087**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
 \* Conduit contribution for Marcia Fudge for Congress

Full Name (Last, First, Middle Initial)  
**C. AMERICAN NURSES' ASSOCIATION PAC (ANA-PAC) (FKA N-**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring	State MD	Zip Code 20910
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FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer	Occupation
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C8635088**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
 \* Conduit contribution for Braley for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
<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)  
**We the People PAC**

**A. COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FE**

Full Name (Last, First, Middle Initial)  
Mailing Address 1701 JFK Boulevard, 49th Floor

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2012

**Transaction ID : C8604520**

Amount of Each Receipt this Period  
1000.00

**B. FMC CORPORATION GOOD GOVERNMENT PROGRAM**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 Pennsylvania Avenue NW  
Suite 325

City Washington	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00033704

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2012

**Transaction ID : C8604522**

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  

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

Amount of Each Receipt this Period  
\_\_\_\_\_

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3600.00

**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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. Allyson Schwartz for Congress**

Mailing Address PO Box 2232

City State Zip Code  
Jenkintown PA 19046

Purpose of Disbursement  
Administrative Services

Candidate Name

**Allyson Schwartz**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2012

**Transaction ID : D407185**

Amount of Each Disbursement this Period

50.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Allyson Schwartz for Congress**

Mailing Address PO Box 2232

City State Zip Code  
Jenkintown PA 19046

Purpose of Disbursement  
Administrative Services

Candidate Name

**Allyson Schwartz**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2012

**Transaction ID : D407187**

Amount of Each Disbursement this Period

50.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. Auburn Quad, Inc.**

Mailing Address P.O. Box 390728

City State Zip Code  
Cambridge MA 02139

Purpose of Disbursement  
Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2012

**Transaction ID : D406952**

Amount of Each Disbursement this Period

3.95

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

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

103.95

**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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. Benchmark Strategies**

Mailing Address 303 Massachusetts Avenue NE

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Fundraising Consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 03 / 2012

Transaction ID : D407158

Amount of Each Disbursement this Period

1134.60

Full Name (Last, First, Middle Initial)

**B. Neil Deegan**

Mailing Address 3545 Tulip St

City Philadelphia State PA Zip Code 19134-2724

Purpose of Disbursement  
Fundraising/Administrative Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 03 / 2012

Transaction ID : D407161

Amount of Each Disbursement this Period

208.33

Full Name (Last, First, Middle Initial)

**C. NGP VAN**

Mailing Address 1101 15th St NW, Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Fundraising Database

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 03 / 2012

Transaction ID : D407160

Amount of Each Disbursement this Period

300.00

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

1642.93

**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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 8340 Germantown Avenue

City Philadelphia State PA Zip Code 19118

Purpose of Disbursement  
Credit Card Payment

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2012

Transaction ID : D407162

Amount of Each Disbursement this Period

2200.50
---------

Full Name (Last, First, Middle Initial)

**B. Purple Onion Catering**

Mailing Address 416 Maple Avenue

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Catering

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2012

Transaction ID : D407163

Amount of Each Disbursement this Period

2200.50
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

2200.50
---------

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

3947.38
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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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. Bruce Braley for Congress**

Date of Disbursement

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

Mailing Address P.O. Box 810  
3151 Brockway Road

**Transaction ID : D407149**

City Waterloo State IA Zip Code 50704-5103

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Conduit contribution from the American Nurses Association

011
Category/ Type

**[MEMO ITEM]**

Candidate Name

**Bruce Braley**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Full Name (Last, First, Middle Initial)

**B. Conyers for Congress**

Date of Disbursement

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

Mailing Address PO Box 70980

**Transaction ID : D407144**

City Washington State DC Zip Code 20024

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Conduit contribution from American Nurses Association PAC

011
Category/ Type

**[MEMO ITEM]**

Candidate Name

**John Conyers Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: MI District: 13

Full Name (Last, First, Middle Initial)

**C. Maffei for Congress**

Date of Disbursement

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

Mailing Address PO Box 74

**Transaction ID : D407139**

City Syracuse State NY Zip Code 13214

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Conduit Contribution from American Nurses Assn PAC

011
Category/ Type

**[MEMO ITEM]**

Candidate Name

**Dan Maffei**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 25

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

**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)

<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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. HORSFORD FOR CONGRESS**

Mailing Address 6100 ELTON AVE SUITE 1000

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement  
Conduit Contribution from American Nurses Assn PAC

011

Candidate Name

**Steven Horsford**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

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

Transaction ID : D407141

Amount of Each Disbursement this Period

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LUCILLE ROYBAL-ALLARD FOR CONGRESS**

Mailing Address 6 E STREET, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Conduit contribution from American Nurses Association PAC

011

Candidate Name

**LUCILLE ROYBAL-ALLARD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: CA District: 40

Date of Disbursement

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

Transaction ID : D407146

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MARCIA FUDGE FOR CONGRESS**

Mailing Address 3729 SILSBY RD

City Cleveland State OH Zip Code 44118

Purpose of Disbursement  
Conduit contribution from the American Nurses Association PAC

011

Candidate Name

**Marcia Fudge**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

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

Transaction ID : D407148

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]

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

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

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**We the People PAC**

Full Name (Last, First, Middle Initial)

**A. Pallone for Congress**

Mailing Address PO Box 3176

City State Zip Code  
Long Branch NJ 07740

Purpose of Disbursement  
Conduit Contribution from American Nurses Assn PAC

011

Candidate Name

**Frank Pallone**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

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

Transaction ID : **D407140**

Amount of Each Disbursement this Period

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Suzanne Bonamici for Congress**

Mailing Address PO Box 1632

City State Zip Code  
Beaverton OR 97075

Purpose of Disbursement  
Conduit Contribution from American Nurses Assn PAC

011

Candidate Name

**Suzanne Bonamici**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: OR District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	3		2	0	1	2		

Transaction ID : **D407138**

Amount of Each Disbursement this Period

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Tammy Duckworth for Congress**

Mailing Address P.O. BOX 8867

City State Zip Code  
Rolling Meadows IL 60008

Purpose of Disbursement  
Conduit contribution from American Nurses Association PAC

011

Candidate Name

**Tammy Duckworth**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

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

Transaction ID : **D407145**

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**We the People PAC**

Full Name (Last, First, Middle Initial)

### A. Philadelphia NAACP

Mailing Address 1619 Cecil B Moore Avenue

City Philadelphia State PA Zip Code 19121

Purpose of Disbursement  
Donation

012

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2012

Transaction ID : D407165

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

1000.00
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**TOTAL** This Period (last page this line number only)..... ▶

1000.00
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