

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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
Porter for Congress

ADDRESS (number and street) 7840 Red Leaf Drive
 Check if different than previously reported. (ACC)
Las Vegas NV 89131

2. **FEC IDENTIFICATION NUMBER** C00367367
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
NV 03

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 04 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Chrissie Hastie

Signature of Treasurer Electronically Filed by Chrissie Hastie Date 07 15 2009

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Porter for Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	3742.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	-3742.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	1544.48	68330.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	899.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1544.48	67431.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1396.56	
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	

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 3 (Revised 12/2003)

Write or Type Committee Name
Porter for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	743.87
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	899.15
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	211.61
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	1854.63

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1544.48	68330.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	3742.00
(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 20(a), (b), and (c)).....	0.00	3742.00
21. OTHER DISBURSEMENTS.....	5000.00	17000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6544.48	89072.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7941.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	7941.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6544.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1396.56

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Porter for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) November Inc</p> <p>Mailing Address PO Box 27972</p> <p>City Las Vegas State NV Zip Code 89126-</p> <p>Purpose of Disbursement Telephone Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90706.E6435</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>TELEPHONE SERVICES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) IN Compliance Inc.</p> <p>Mailing Address PO Box 751271</p> <p>City Las Vegas State NV Zip Code 89136-</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90624.E6426</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.98"/></p> <p>PRINTING</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) IN Compliance Inc.</p> <p>Mailing Address PO Box 751271</p> <p>City Las Vegas State NV Zip Code 89136-</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90414.E6410</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.50"/></p> <p>PRINTING</p>

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 8

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Porter for Congress

A.	Full Name (Last, First, Middle Initial) IN Compliance Inc.		Transaction ID: 90414.E6409	
	Mailing Address PO Box 751271		Date of Disbursement MM / DD / YYYY 04 / 15 / 2009	
	City Las Vegas	State NV	Zip Code 89136-	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Consulting Treasury		Category/ Type	CONSULTING TREASURY
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

1544.48

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Porter for Congress

A.	Full Name (Last, First, Middle Initial) Bill Shuster for Congress	Transaction ID: 90624.E6429 Date of Disbursement 06 / 24 / 2009
	Mailing Address 513 Allgheny Street	Amount of Each Disbursement this Period 1000.00
	City Hollidaysburg State PA Zip Code 16648-	
	Purpose of Disbursement PRIMARY CONTRIBUTION	Category/Type
	Candidate Name WILLIAM F SHUSTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cantor for Congress	Transaction ID: 90624.E6434 Date of Disbursement 06 / 24 / 2009
	Mailing Address PO Box 17813	Amount of Each Disbursement this Period 1000.00
	City Richmond State VA Zip Code 23226-	
	Purpose of Disbursement PRIMARY CONTRIBUTION	Category/Type
	Candidate Name ERIC CANTOR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Heller for Congress	Transaction ID: 90624.E6433 Date of Disbursement 06 / 24 / 2009
	Mailing Address 1354 Minuet Street	Amount of Each Disbursement this Period 1000.00
	City Henderson State NV Zip Code 89052-	
	Purpose of Disbursement PRIMARY CONTRIBUTION	Category/Type
	Candidate Name DEAN HELLER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Porter for Congress

A.	Full Name (Last, First, Middle Initial) Kirk for Mayor	Transaction ID: 90624.E6427	
	Mailing Address 2018 Deer Springs Drive	Date of Disbursement MM / DD / YYYY 06 / 01 / 2009	
	City Henderson State NV Zip Code 89052-	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement CONTRIBUTION TO STATE CANDIDATE	Category/ Type	
	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) Lee Terry for Congress	Transaction ID: 90624.E6430	
	Mailing Address PO Box 540098	Date of Disbursement MM / DD / YYYY 06 / 24 / 2009	
	City Omaha State NE Zip Code 68154-	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement PRIMARY CONTRIBUTION	Category/ Type	
	Candidate Name LEE TERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

5000.00