

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. 12FE4M5 NEW PAC

ADDRESS (number and street) P.O. BOX 7480 VISALIA CA 93290 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00398750 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, 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 PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2014 through 06 / 30 / 2014

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 Toni Dian Nunes

Signature of Treasurer Toni Dian Nunes [Electronically Filed] Date 07 / 07 / 2014

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

NEW 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="2014"/>	<input type="text" value="135210.49"/>	<input type="text" value="135210.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="196749.72"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="101500.00"/>	<input type="text" value="205800.00"/>
(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="298249.72"/>	<input type="text" value="341010.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="100652.70"/>	<input type="text" value="143413.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="197597.02"/>	<input type="text" value="197597.02"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

NEW PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

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).....	9000.00	43500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9000.00	43500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	92500.00	162300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	101500.00	205800.00
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))..... ▶	101500.00	205800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	101500.00	205800.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	35152.70	63913.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	35152.70	63913.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65500.00	79500.00
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	0.00	0.00
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)) ..	100652.70	143413.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100652.70	143413.47

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)	101500.00	205800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	101500.00	205800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	35152.70	63913.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35152.70	63913.47

**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 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. BARONA BAND OF MISSION INDIANS

Mailing Address 1095 BARONA RD

City LAKESIDE State CA Zip Code 92040

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014
Transaction ID : SA11AI.8753

Amount of Each Receipt this Period
2500.00

DATED: 3/12/14

Full Name (Last, First, Middle Initial)
B. COLUSA INDIAN COMMUNITY COUNCIL

Mailing Address 3730 HIGHWAY 45

City COLUSA State CA Zip Code 95932

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014
Transaction ID : SA11AI.8735

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. JASON PAPICH

Mailing Address P.O. BOX 2210

City PISMO BEACH State CA Zip Code 93448

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

Name of Employer Occupation
 PAPICH CONSTRUCTION CO INC
 SELF EMPLOYED/CONSTRUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 09 / 2014
Transaction ID : SA11AI.8738

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. JOHN D SCOFIELD

Mailing Address 227 C ST SE

City State Zip Code
WASHINGTON DC 20003

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

Name of Employer Occupation
SHOCKEY SCOFIELD SOLUTIONS, LL PARTNER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2014
Transaction ID : SA11AI.8737

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. RICHARD ZACKY

Mailing Address 6556 N BLACKHAWK LN

City State Zip Code
CLOVIS CA 93611

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

Name of Employer Occupation
ZACKY FARMS LLC MANAGER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2014
Transaction ID : SA11AI.8734

Amount of Each Receipt this Period
500.00

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

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
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	9000.00

**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 8 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, N.W.
SUITE 350

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 08 / 2014
Transaction ID : SA11C.8751

Amount of Each Receipt this Period
5000.00

DATED: 4/30/14

Full Name (Last, First, Middle Initial)
B. AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13th Street, NW
12th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 08 / 2014
Transaction ID : SA11C.8752

Amount of Each Receipt this Period
2500.00

DATED: 4/29/14

Full Name (Last, First, Middle Initial)
C. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11C.8731

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET
SUITE 225

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 29 / 2014
Transaction ID : SA11C.8744

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 23 / 2014
Transaction ID : SA11C.8745

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. CALPINE CORPORATION PAC

Mailing Address 4160 Dublin Blvd., Suite 100

City Dublin State CA Zip Code 94568

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 08 / 2014
Transaction ID : SA11C.8747

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. CME GROUP, INC. PAC (CME/CBOT/NYMEX PAC)

Mailing Address 20 South Wacker Drive

City	State	Zip Code
Chicago	IL	60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : SA11C.8724

Amount of Each Receipt this Period
2500.00

DATED: 6/9/14

Full Name (Last, First, Middle Initial)
B. DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND

Mailing Address 1000 DARDEN CENTER DRIVE

City	State	Zip Code
ORLANDO	FL	32837

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : SA11C.8723

Amount of Each Receipt this Period
2500.00

DATED: 6/16/14

Full Name (Last, First, Middle Initial)
C. EDISON INTERNATIONAL PAC

Mailing Address 520 S GRAND AVENUE SUITE 700

City	State	Zip Code
LOS ANGELES	CA	90071

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11C.8756

Amount of Each Receipt this Period
2500.00

DATED: 4/2/14

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)
A. EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND

Mailing Address 8000 W FLORISSANT AVE
STATION 2310

City ST. LOUIS State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11C.8727

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11C.8743

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2014

Transaction ID : SA11C.8729

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. HEALTH NET, INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address 455 CAPITOL MALL, SUITE 600

City SACRAMENTO	State CA	Zip Code 95814
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FEC ID number of contributing federal political committee. **C** C00230789

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	05	/	2014

Transaction ID : SA11C.8748

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address 1399 New York Avenue Suite 720

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00217638

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2014

Transaction ID : SA11C.8733

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY BOX 97017

City REDMOND	State WA	Zip Code 98073
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FEC ID number of contributing federal political committee. **C** C00227546

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

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SA11C.8722

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1717 RHODE ISLAND AVE NW
SUITE 400

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 26 / 2014
Transaction ID : SA11C.8721

Amount of Each Receipt this Period: 2500.00

DATED: 6/10/14

Full Name (Last, First, Middle Initial)
B. NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)

Mailing Address 2055 L STREET, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 28 / 2014
Transaction ID : SA11C.8725

Amount of Each Receipt this Period: 5000.00

Full Name (Last, First, Middle Initial)
C. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave.
Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 20 / 2014
Transaction ID : SA11C.8741

Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 42
<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)
NEW PAC

Full Name (Last, First, Middle Initial)
A. NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11C.8742

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. PG&E CORPORATION EMPLOYEES ENERGYPAC

Mailing Address 77 Beale Street Mail Code: B29H

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C C00177469**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : SA11C.8754

Amount of Each Receipt this Period
 5000.00

DATED: 4/8/14

Full Name (Last, First, Middle Initial)
C. POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 Pennsylvania Avenue N W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2014
Transaction ID : SA11C.8720

Amount of Each Receipt this Period
 2500.00

DATED: 6/2/14

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. TYCO INTERNATIONAL MANAGEMENT COMPANY PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 ROSZEL ROAD
 City PRINCETON State NJ Zip Code 08540
 FEC ID number of contributing federal political committee. **C** C00113753
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014
Transaction ID : SA11C.8750
 Amount of Each Receipt this Period
 2500.00

B. WELLPOINT, INC. WELLPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 MONUMENT CIRCLE
 City INDIANAPOLIS State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C** C00197228
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2014
Transaction ID : SA11C.8732
 Amount of Each Receipt this Period
 2500.00

C. WESTERN UNITED DAIRYMEN'S ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1315 K STREET
 City MODESTO State CA Zip Code 95354
 FEC ID number of contributing federal political committee. **C** C00186072
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11C.8746
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 42
(check only one)

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

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11C.8755

Amount of Each Receipt this Period
5000.00

DATED: 4/1/14

B. 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	92500.00

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CAHOOTS CATERING CO

Mailing Address P.O. BOX 760

City PASO ROBLES State CA Zip Code 93445

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : SB21B.8602

Amount of Each Disbursement this Period

2880.00

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Transaction ID : SB21B.8763

Amount of Each Disbursement this Period

3091.14

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Transaction ID : SB21B.8763.0

Amount of Each Disbursement this Period

2881.78

[MEMO ITEM]

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

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

5971.14

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8716

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. KLWINES.COM

Mailing Address 3005 EL CAMINO REAL

City REDWOOD CITY State CA Zip Code 94061

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8716.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8716.1

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CENTRAL VALLEY BUSINESS FORMS

Mailing Address 7500 W SUNNYVIEW AVE

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC SOLICITATION: HOODIES

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SB21B.8586

Amount of Each Disbursement this Period

2607.74

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: OFFICE
SUPPLIES/COMMUNICATIONS/SOFTWARE/ENS&FLASH/MAILING COSTS

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : SB21B.8571

Amount of Each Disbursement this Period

876.67

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 2425 S MOONEY BLVD

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
OFFIC EXP: ENVELOPES/BINDERS/TAPE/PROTECTORES/FLASH
DRIVE/PAPER

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : SB21B.8571.0

Amount of Each Disbursement this Period

95.92

[MEMO ITEM]

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

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

3484.41

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. USPS - U.S. POSTAL SERVICE

Mailing Address GENERAL DELIVERY

City VISALIA State CA Zip Code 93290

Purpose of Disbursement
OFFICE EXP: POSTAGE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : SB21B.8571.1

Amount of Each Disbursement this Period

1.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MIKE'S QUALITY CAMERAS

Mailing Address 105 E MAIN STREET

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: LENS & FLASH

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : SB21B.8571.2

Amount of Each Disbursement this Period

664.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL: LOGING/FOOD/PARKING FEES/CAB FARES (BALANCE UNDER THRESHOLD)
Candidate Name

002

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : SB21B.8579

Amount of Each Disbursement this Period

1041.16

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

1041.16

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. HYATT REGENCY

Mailing Address P.O. BOX 843977

City DALLAS State TX Zip Code 75284

Purpose of Disbursement
TRAVEL: HOTEL LODGING

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	4		

Transaction ID : SB21B.8579.0

Amount of Each Disbursement this Period

8	1	5	.	5	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KINGFISH

Mailing Address 201 SOUTH B STREET

City SAN MATEO State CA Zip Code 94401

Purpose of Disbursement
TRAVEL: FOOD/BEV

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	4		

Transaction ID : SB21B.8579.1

Amount of Each Disbursement this Period

2	0	0	.	4	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC SOLICITATION: HATS/POSTERS (BALANCE UNDER THRESHOLD)

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	1	4		

Transaction ID : SB21B.8584

Amount of Each Disbursement this Period

7	9	6	.	4	0
---	---	---	---	---	---

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

7	9	6	.	4	0
---	---	---	---	---	---

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

7	9	6	.	4	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 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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. PUKKA HEADWEAR

Mailing Address 337 S MAIN STREET

City FINDLEY State OH Zip Code 45840

Purpose of Disbursement
PAC SOLICITATION: HATS

003
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Transaction ID : SB21B.8584.0

Amount of Each Disbursement this Period

7865.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
OFFICE EXP: OFFICE SUPPLIES/SOFTWARE LICENSE/MAILING COSTS/INTERNET COSTS/BALANCE UNDER THRESHOLD

001
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Transaction ID : SB21B.8587

Amount of Each Disbursement this Period

581.42

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 2425 S MOONEY BLVD

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
OFFICE EXP: PAPER/TAPE/TONER

001
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Transaction ID : SB21B.8587.0

Amount of Each Disbursement this Period

491.64

[MEMO ITEM]

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

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

581.42

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL: AUTO RENTAL/FOOD/BEV/LODGING/CONFERENCE

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	4		

Transaction ID : SB21B.8593

Amount of Each Disbursement this Period

7	6	2	.	9	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. PAYPAL

Mailing Address 2211 NORTH FIRST STREET

City SAN JOSE State CA Zip Code 95131

Purpose of Disbursement
TRAVEL: SUNBIRD CONFERENCE COSTS

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	4		

Transaction ID : SB21B.8593.0

Amount of Each Disbursement this Period

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVILA LIGHTHOUSE SUITES

Mailing Address 550 FRONT STREET

City AVILA BEACH State CA Zip Code 93424

Purpose of Disbursement
TRAVEL: LODGING

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	4		

Transaction ID : SB21B.8593.1

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

7	6	2	.	9	2
---	---	---	---	---	---

7	6	2	.	9	2
---	---	---	---	---	---

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/DECORATIONS
(BALANCE UNDER THRESHOLD)
Candidate Name

003
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SB21B.8597

Amount of Each Disbursement this Period

665.43

Full Name (Last, First, Middle Initial)

B. EPIPHANY PRODUCTIONS, INC

Mailing Address 104 HUME AVE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/SERVICE
Candidate Name

003
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SB21B.8597.0

Amount of Each Disbursement this Period

625.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
CONSULTING: OFFICE MANAGEMENT
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SB21B.8601

Amount of Each Disbursement this Period

2250.00

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

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

2915.43

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/TABLE
RENTAL/DECORATIONS (BALANCE UNDER THRESHOLD)
Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8603

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. LONE MADRON

Mailing Address 5800 ADELAIDA ROAD

City PASO ROBLES State CA Zip Code 93446

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV
Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8603.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TABLAS CREEK VINEYARD

Mailing Address 9339 ADELAIDA ROAD

City PASO ROBLES State CA Zip Code 93446

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV
Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8603.1

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
NEW PAC

Full Name (Last, First, Middle Initial) A. VILLICANA WINERY		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 2725 ADELAIDA RD		Transaction ID : SB21B.8603.2
City PASO ROBLES State CA Zip Code 93446	Amount of Each Disbursement this Period 920.00	
Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/BEV	Category/Type 003	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. COSTCO WHOLESALE		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 3750 S MOONEY BLVD		Transaction ID : SB21B.8603.3
City VISALIA State CA Zip Code 93277	Amount of Each Disbursement this Period 758.44	
Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/FOOD/BEV/PAPER GOODS/TABLE SUPPLIES	Category/Type 003	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SMART & FINAL		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 600 W CENTER ST		Transaction ID : SB21B.8603.4
City VISALIA State CA Zip Code 93279	Amount of Each Disbursement this Period 349.99	
Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/FOOD/BEV/PAPER GOODS/TABLE SUPPLIES	Category/Type 003	[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. TACO ROCO

Mailing Address 3230 BROAD ST

City State Zip Code
SAN LUIS OBISPO CA 93401

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8603.5

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TAYLOR RENTAL

Mailing Address 2790 BROAD STREET

City State Zip Code
SAN LUIS OBISPO CA 93401

Purpose of Disbursement
PAC FUNDRAISING EXP: TABLE/CHAIR RENTAL

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8603.6

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City State Zip Code
VISALIA CA 93291

Purpose of Disbursement
OFFICE EXP: LABELING SYSTEM/TONER/TAPE/ENVELOPES/MAILING
COSTS/SOFTWARE (BALANCE UNDER THRESHOLD)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8618

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)

<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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 2425 S MOONEY BLVD

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
OFFICE EXP: SUPPLIES/LABELING SYSTEM/TONER/TAPE/ENVELOPES

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8618.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS - U.S. POSTAL SERVICE

Mailing Address GENERAL DELIVERY

City VISALIA State CA Zip Code 93290

Purpose of Disbursement
OFFICE EXP: MAILING COSTS

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8618.3

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL: LODGING/FOOD/TRANSPORTATION COSTS

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8625

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)

<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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. THE CLIFFS

Mailing Address 2757 SHELL BEACH RD

City SHELL BEACH State CA Zip Code 93449

Purpose of Disbursement
TRAVEL: LODGING EXP

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	4

Transaction ID : SB21B.8625.0

Amount of Each Disbursement this Period

9	2	5	.	2	8
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT-A-CAR

Mailing Address 1040 EAST MAIN

City VISALIA State CA Zip Code 93292

Purpose of Disbursement
TRAVEL: AUTO RENTAL

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	4

Transaction ID : SB21B.8625.1

Amount of Each Disbursement this Period

4	8	8	.	8	4
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AVILA LIGHTHOUSE SUITES

Mailing Address 550 FRONT STREET

City AVILA BEACH State CA Zip Code 93424

Purpose of Disbursement
TRAVEL; LODGEING

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	4

Transaction ID : SB21B.8625.3

Amount of Each Disbursement this Period

8	7	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

0	0	0
---	---	---

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

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 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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN STAR TOURS

Mailing Address 897 OAK PARK BLVD, #204

City PISMO BEACH State CA Zip Code 93449

Purpose of Disbursement
TRAVEL: TRANSPORTATION COST/BUS

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2014

Transaction ID : SB21B.8625.4

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. IDEAS COMPUTERS

Mailing Address 508 OXFORD STREET

City WORTHINGTON State MN Zip Code 56187

Purpose of Disbursement
OFFICE EXP: COMPUTER REPAIR

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SB21B.8715

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

C. PAYPAL

Mailing Address 2211 NORTH FIRST STREET

City SAN JOSE State CA Zip Code 95131

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2014

Transaction ID : SB21B.8740

Amount of Each Disbursement this Period

31.30

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

101.30

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)
NEW PAC

Full Name (Last, First, Middle Initial) A. CAITLIN SHANNON		Date of Disbursement MM / DD / YYYY 05 / 06 / 2014
Mailing Address 201 I STREET NE		Transaction ID : SB21B.8633
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement CONSULTING: FUNDRAISING	Amount of Each Disbursement this Period 2250.00
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CAITLIN SHANNON		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 201 I STREET NE		Transaction ID : SB21B.8667
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/FOOD/BEV/CARDS/TIPS (BALANCE UNDER THRESHOLD)	Amount of Each Disbursement this Period 201.25
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CAITLIN SHANNON		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 201 I STREET NE		Transaction ID : SB21B.8670
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL: REIMURSMENT FOR FUEL	Amount of Each Disbursement this Period 51.55
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2502.80
TOTAL This Period (last page this line number only).....▶	35152.70

**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)
NEW PAC

Full Name (Last, First, Middle Initial) A. BENISHEK FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 19 / 2014
Mailing Address 802 Pentoga Trail		Transaction ID : SB23.8635
City Crystal Falls	State MI	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name DANIEL J BENISHEK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: MI District: 01	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. BOBBY SCHILLING FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 367 Avenue of The Cities Suite D		Transaction ID : SB23.8689
City East Moline	State IL	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name ROBERT T MR. SCHILLING	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IL District: 17	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. BRIAN ELLIS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address PO BOX 6568		Transaction ID : SB23.8757
City GRAND RAPIDS	State MI	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 5000.00
Candidate Name BRIAN ROBERT ELLIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: MI District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. CARL DEMAIO FOR CONGRESS

Mailing Address PO BOX 27227

City SAN DIEGO State CA Zip Code 92198

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

CARL DEMAIO

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	4

Transaction ID : **SB23.8671**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. CARLOS CURBELO CONGRESS

Mailing Address 8770 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

CARLOS CURBELO

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	4

Transaction ID : **SB23.8647**

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. COMSTOCK FOR CONGRESS

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

BARBARA J COMSTOCK

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : **SB23.8760**

Amount of Each Disbursement this Period

2	0	0	0	0	0
---	---	---	---	---	---

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

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

5	5	0	0	0	0
---	---	---	---	---	---

5	5	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)
NEW PAC

Full Name (Last, First, Middle Initial) A. COMSTOCK FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address PO BOX 71596		Transaction ID : SB23.8660
City RICHMOND	State VA	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name BARBARA J COMSTOCK	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 10		

Full Name (Last, First, Middle Initial) B. DOLD FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address PO Box 8145		Transaction ID : SB23.8653
City Northfield	State IL	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name ROBERT JAMES MR. DOLD JR.	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 10		

Full Name (Last, First, Middle Initial) C. DOUG OSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 9321 SILVERBEND LANE		Transaction ID : SB23.8674
City ELK GROVE	State CA	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 5000.00
Candidate Name DOUG OSE	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 07		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAN LOGUE FOR CONGRESS

Mailing Address PO BOX 984

City State Zip Code
WILLOWS CA 95988

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

DANIEL LOGUE

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : SB23.8677

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

City State Zip Code
SAVANNAH GA 31402

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

JOHN H SR REP KINGSTON

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2014

Transaction ID : SB23.8680

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOE HECK

Mailing Address PO Box 750114

City State Zip Code
Las Vegas NV 89136

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

JOE HECK

Category/
Type

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2014

Transaction ID : SB23.8638

Amount of Each Disbursement this Period

3000.00

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF STEWART MILLS INC

Mailing Address PO BOX 1039

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

STEWART MILLS

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2014

Transaction ID : **SB23.8650**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GORELL FOR CONGRESS

Mailing Address 30151 TOMAS

City RANCHO STA MARGARI State CA Zip Code 92688

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

JEFF GORELL

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2014

Transaction ID : **SB23.8673**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. HALL FOR CONGRESS COMMITTEE (RALPH HALL - ROCKWALL, TEXAS)

Mailing Address POST OFFICE BOX 711

City ROCKWALL State TX Zip Code 75087

Purpose of Disbursement

011

Candidate Name

RALPH MOODY HALL

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Transaction ID : **SB23.8565**

Amount of Each Disbursement this Period

2000.00

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial)

A. JENKINS FOR CONGRESS

Mailing Address PO BOX 727

City HUNTINGTON State WV Zip Code 25711

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
EVAN H JENKINS

Category/
Type

Office Sought: House
 Senate
 President
State: WV District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2014

Transaction ID : **SB23.8664**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. LEE TERRY FOR CONGRESS

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
LEE TERRY

Category/
Type

Office Sought: House
 Senate
 President
State: NE District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : **SB23.8632**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. MCSALLY FOR CONGRESS

Mailing Address PO BOX 19128

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
MARTHA E MCSALLY

Category/
Type

Office Sought: House
 Senate
 President
State: AZ District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2014

Transaction ID : **SB23.8640**

Amount of Each Disbursement this Period

3000.00

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

9000.00

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)
NEW PAC

Full Name (Last, First, Middle Initial) A. MIKE BOST FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address PO BOX 1212		Transaction ID : SB23.8657
City MURPHYSBORO	State IL	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 3000.00
Candidate Name MICHAEL J BOST	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IL District: 12	

Full Name (Last, First, Middle Initial) B. MOONEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address P.O. BOX 1863		Transaction ID : SB23.8693
City MARTINSBURG	State WV	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name ALEXANDER XAVIER MOONEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: WV District: 02	

Full Name (Last, First, Middle Initial) C. NESTANDE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 2150 RIVER PLAZA DR. #150		Transaction ID : SB23.8672
City SACRAMENTO	State CA	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011	Amount of Each Disbursement this Period 3000.00
Candidate Name BRIAN NESTANDE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 36	

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. PEDRO FOR CONGRESS

Mailing Address P.O. BOX 2854

City State Zip Code
REDMOND WA 98073

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

PEDRO CELIS

Category/
Type

Office Sought: House
 Senate
 President
State: WA District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	20	/	2014

Transaction ID : SB23.8703

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RICHARD HANNA FOR CONGRESS COMMITTEE

Mailing Address 2308 GENESEE STREET

City State Zip Code
UTICA NY 13502

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

RICHARD HANNA

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	19	/	2014

Transaction ID : SB23.8634

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. RICK W. ALLEN FOR CONGRESS

Mailing Address P. O. BOX 338

City State Zip Code
AUGUSTA GA 30903

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

RICHARD W ALLEN

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	20	/	2014

Transaction ID : SB23.8683

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

Full Name (Last, First, Middle Initial) A. RODNEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 19 / 2014
Mailing Address PO BOX 344		Transaction ID : SB23.8636
City TAYLORVILLE	State IL	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 2000.00
Candidate Name RODNEY DAVIS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 13		

Full Name (Last, First, Middle Initial) B. RYAN COSTELLO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address PO BOX 3154		Transaction ID : SB23.8654
City WEST CHESTER	State PA	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 3000.00
Candidate Name RYAN A COSTELLO	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

Full Name (Last, First, Middle Initial) C. SENGER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address PO BOX 4883		Transaction ID : SB23.8686
City NAPERVILLE	State IL	
Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	Amount of Each Disbursement this Period 1000.00
Candidate Name DARLENE SENGER	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 11		

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

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

6000.00

**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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. SIMPSON FOR CONGRESS

Mailing Address 1487 PARKWAY DRIVE

City BLACKFOOT State ID Zip Code 83221

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

MICHAEL SIMPSON

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ID District: 02

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Transaction ID : **SB23.8568**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

WILLIAM STEVE II SOUTHERLAND

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : **SB23.8639**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. TISEI CONGRESSIONAL COMMITTEE

Mailing Address 932 LYNNFIELD STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

RICHARD R. TISEI

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2014

Transaction ID : **SB23.8663**

Amount of Each Disbursement this Period

1000.00

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

8000.00

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)
NEW PAC

Full Name (Last, First, Middle Initial)

A. TOM MACARTHUR FOR CONGRESS INC.

Mailing Address PO BOX 225

City COLONIA State NJ Zip Code 07067

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
THOMAS MACARTHUR

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: NJ District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	4

Transaction ID : **SB23.8690**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. WESTROM FOR CONGRESS

Mailing Address PO BOX 210

City ELBOW LAKE State MN Zip Code 56531

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
TORREY WESTROM

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: MN District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	4

Transaction ID : **SB23.8643**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

2	0	0	0	0	0	0	0	0	0

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

6	5	5	0	0	0	0	0	0	0