

RECEIVED

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FEC MAIL CENTER

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

KUCCHAR FOR US HOUSE COMMITTEE

ADDRESS (number and street)

4107 ABELIA CT

Check if different than previously reported. (ACC)

ARLINGTON TX 76017

2. FEC IDENTIFICATION NUMBER

C00493965

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

TX

06

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

MM

DD

YYYY

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM

DD

YYYY

in the State of

5. Covering Period

01

01

2011

through

03

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Joyce W. Kuchar

Signature of Treasurer

Joyce W. Kuchar

Date

04

13

2011

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

11030500646

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

KUCIAR FOR US HOUSE COMMITTEE

Report Covering the Period: From:

01 / 01 / 2011

To:

03 / 31 / 2011

	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))	679.32	679.32
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	679.32	679.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	369.93	369.93
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	369.93	369.93
8. Cash on Hand at Close of Reporting Period (from Line 27)	309.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

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

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

11030600647

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

KUCIAR FOR US HOUSE COMMITTEE

Report Covering the Period: From:

To:

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

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals..... ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

11030600678

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	369.93	369.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	369.93	369.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	679.32
25. SUBTOTAL (add Line 23 and Line 24).....	679.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	369.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	309.39

11030600649

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

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
KUCHAR FOR US HOUSE COMMITTEE

A. Full Name (Last, First, Middle Initial)
KUCHAR, FRANK C

Mailing Address
4107 ABELIA CT

City State Zip Code
ARLINGTON TX 76017

FEC ID number of contributing federal political committee.
C00493965

Name of Employer Occupation
HAYNES AND BOONE, LLP PAYROLL SUPERVISOR

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
48432

Date of Receipt
02 / 26 / 2011

Amount of Each Receipt this Period
343.2

B. Full Name (Last, First, Middle Initial)
KUCHAR, FRANK C

Mailing Address
4107 ABELIA CT

City State Zip Code
ARLINGTON TX 76017

FEC ID number of contributing federal political committee.
C00493965

Name of Employer Occupation
HAYNES AND BOONE, LLP PAYROLL SUPERVISOR

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
48432

Date of Receipt
03 / 03 / 2011

Amount of Each Receipt this Period
500.0

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

Mailing Address
4107 ABELIA CT

City State Zip Code
ARLINGTON TX 76017

FEC ID number of contributing federal political committee.
C00493965

Name of Employer Occupation
HAYNES AND BOONE, LLP PAYROLL SUPERVISOR

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
48432

Date of Receipt

Amount of Each Receipt this Period
500.0

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

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

1343.2

05900901011

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

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

FOR LINE NUMBER: PAGE **2** OF **2**

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KUCHAR FOR US HOUSE COMMITTEE

Full Name (Last, First, Middle Initial)
A. KUCHAR, FRANK C

Mailing Address
4107 ABELIA CT

City State Zip Code
ARLINGTON TX 76017

FEC ID number of contributing federal political committee.
C00493965

Name of Employer Occupation
HAYNES AND BOONE, LLP PAYROLL SUPERVISOR

Receipt For: Primary General
 Other (specify)
Election Cycle-to-Date
484.32

Date of Receipt
MM / DD / YYYY
03 / 14 / 2011

Amount of Each Receipt this Period
350.00

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

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)
Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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)
Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

350.00
484.32

1590696011

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KUC HAR FOR US HOUSE COMMITTEE

A. Full Name (Last, First, Middle Initial)
LITCHFIELD, PATRICIA

Mailing Address
167 HIGHVIEW DRIVE

City State Zip Code
CLIFTON NJ 07013

FEC ID number of contributing federal political committee.
000493965

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
03 / 16 / 2011

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
ALBRIGHT, KAREN L.

Mailing Address
177 CR110

City State Zip Code
FAIRFIELD TX 75840

FEC ID number of contributing federal political committee.
000493965

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
20.00

Date of Receipt
03 / 16 / 2011

Amount of Each Receipt this Period
20.00

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

Mailing Address
123 FAIRVIEW ST. P.O. Box 123

City State Zip Code
AVIS PA 17721-0623

FEC ID number of contributing federal political committee.
000493965

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
03 / 17 / 2011

Amount of Each Receipt this Period
100.00

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

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

145.00

11030600652

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

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

FOR LINE NUMBER: PAGE **2** OF **2**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KUCHAR FOR US HOUSE COMMITTEE

Full Name (Last, First, Middle Initial)
A. CARTER, KENNETH

Mailing Address
2520 MELVIN AVE

City **ST LOUIS** State **MO** Zip Code **63144-2541**

FEC ID number of contributing federal political committee. **C00493965**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
03 / 18 / 2011

Amount of Each Receipt this Period
50.00

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

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)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

500.00

1950.00

11030600653

**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 **1** OF **2**

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

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NAME OF COMMITTEE (In Full)

KUCHAR FOR US HOUSE COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2011

A. **GoDaddy.com, Inc**

Mailing Address

14455 N. HAYDEN ROAD STE 219

City

SCOTTSDALE

State

AZ

Zip Code

85206

Purpose of Disbursement

REGISTER WEBSITE DOMAIN

0.01

Candidate Name

FRANK C. KUCHAR

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **TX**

District: **06**

Amount of Each Disbursement this Period

343.2

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2011

B. **AMERICAN MAJORITY, INC**

Mailing Address

P.O. Box 87

City

PURCELLVILLE

State

VA

Zip Code

20134

Purpose of Disbursement

TRAINING SEMINAR

0.01

Candidate Name

FRANK C. KUCHAR

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **TX**

District: **06**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2011

C. **U.S. POSTAL SERVICE**

Mailing Address

4108 SW GREEN OAKS BLVD

City

ARLINGTON

State

TX

Zip Code

76017

Purpose of Disbursement

PO BOX RENTAL FEE (6 MONTHS)

0.01

Candidate Name

FRANK C. KUCHAR

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **TX**

District: **06**

Amount of Each Disbursement this Period

50.00

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

1343.2

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

1103060054

**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 2 OF 2

<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)

KUCHAR FOR US HOUSE COMMITTEE

Full Name (Last, First, Middle Initial)

A. **SEAN FOUSHEE**

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2011

Mailing Address

4921 SADDLEBACK RD

City

ARLINGTON

State

TX

Zip Code

76017

Amount of Each Disbursement this Period

13,000

Purpose of Disbursement

WEB DESIGN WORK & SERVER FEE

001

Candidate Name

FRANK C. KUCHAR

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **TX**

District: **06**

Full Name (Last, First, Middle Initial)

B. **BANK OF AMERICA**

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2011

Mailing Address

5295 S. COOPER

City

ARLINGTON

State

TX

Zip Code

76017

Amount of Each Disbursement this Period

69.00

Purpose of Disbursement

FEE FOR PRINTING BANK CHECKS

001

Candidate Name

FRANK C. KUCHAR

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **TX**

District: **06**

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

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

199.00

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

199.00

1103060655

**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 | OF |

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

KUCHAR FOR US HOUSE COMMITTEE

Full Name (Last, First, Middle Initial)

A. **GOT PRINT.COM**

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2011

Mailing Address

7625 N. SAN FERNANDO RD

City

BURBANK

State

CA

Zip Code

91505

Amount of Each Disbursement this Period

Amount: **30.79**

Purpose of Disbursement

PRINT BUSINESS CARDS

Category/Type
006

Candidate Name

FRANK C. KUCHAR

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **TX** District: **06**

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Amount: []

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Amount: []

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

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

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

Amount: **30.79**
Amount: **30.79**

1103060058

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

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NAME OF COMMITTEE (In Full)
KUCHAR FOR US HOUSE COMMITTEE

A. TICKETS TO THE CITY

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY
03 / 28 / 2011

Mailing Address: **720 OAKWOOD TRAIL**

City: **FT WORTH** State: **TX** Zip Code: **76112**

Purpose of Disbursement: **DEDUCTION OF CREDIT CARD FEES FR. CONTRIB.** Amount of Each Disbursement this Period: **58.2**

Candidate Name: **FRANK C. KUCHAR** Category/Type: **0.03**

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

State: **TX** District: **06**

B.

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____ Amount of Each Disbursement this Period _____

Candidate Name _____ Category/Type _____

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

State: _____ District: _____

C.

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: MM / DD / YYYY

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____ Amount of Each Disbursement this Period _____

Candidate Name _____ Category/Type _____

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

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) **58.2**

TOTAL This Period (last page this line number only) **58.2**

11030600657

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
4/15/11

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JMW
 PREPARER
 (3/2005)

4/24/11
 DATE PREPARED

85900905011