

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

HUCK PAC

ADDRESS (number and street) PO BOX 2008

Check if different than previously reported. (ACC)

LITTLE ROCK AR 72203

2. **FEC IDENTIFICATION NUMBER** C00448373

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 06 30 2010

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 Bryan Jeffrey

Signature of Treasurer Electronically Filed by Bryan Jeffrey Date 12 02 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
HUCK PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		192151.24
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	232787.49									
(c) Total Receipts (from Line 19)	258582.74	531409.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	491370.23	723560.95								
7. Total Disbursements (from Line 31)	262065.30	494256.02								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	229304.93	229304.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
HUCK PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	47540.60	112165.60
(ii) Unitemized	210042.14	393113.81
(iii) TOTAL (add Lines 11(a)(i) and (ii)	257582.74	505279.41
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	257582.74	506279.41
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	24130.30
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	258582.74	531409.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	258582.74	531409.71

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	192380.30	403021.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	192380.30	403021.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	53000.00	66500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	185.00	235.00
(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))	185.00	235.00
29. Other Disbursements.....	16500.00	24500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	262065.30	494256.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	262065.30	494256.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	257582.74	506279.41
34. Total Contribution Refunds (from Line 28(d))	185.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	257397.74	506044.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	192380.30	403021.02
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	24130.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	192380.30	378890.72

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 168
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 05 / 23 / 2010
Transaction ID: SA11AI.88245
 Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 05 / 28 / 2010
Transaction ID: SA11AI.88615
 Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 05 / 2010
Transaction ID: SA11AI.89890
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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 / 168
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 10 / 2010

Transaction ID: SA11AI.90674

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 16 / 2010

Transaction ID: SA11AI.91811

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 18 / 2010

Transaction ID: SA11AI.92116

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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 8 / 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 06 / 22 / 2010
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.92272
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00	

B.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 06 / 26 / 2010
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.94553
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00	

C.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.97206
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	70.00
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 / 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt
	Mailing Address 1690 S Walnut Drive		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Warsaw	IN	46580
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Refior Law Office		Occupation Paralegal	Transaction ID: SA11AI.97688
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="410.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) David Anderson		Date of Receipt
	Mailing Address P.O. Box 9772		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Birmingham	AL	35220
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Eagle CPS Security		Occupation Bank Guard	Transaction ID: SA11AI.86105
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

C.	Full Name (Last, First, Middle Initial) Patricia Bellairs		Date of Receipt
	Mailing Address 3005 Bay Vista Avenue		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tampa	FL	33611
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Moffitt Cancer Center		Occupation Registered Nurse	Transaction ID: SA11AI.86891
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="570.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 168
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 12 / 2010

Transaction ID: SA11AI.91171

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Ernest Bianco

Mailing Address 8902 Eagle Pt. Loop Road SW

City Lakewood State WA Zip Code 98498

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 29 / 2010

Transaction ID: SA11AI.85225

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Ernest Bianco

Mailing Address 8902 Eagle Pt. Loop Road SW

City Lakewood State WA Zip Code 98498

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 15 / 2010

Transaction ID: SA11AI.86857

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Ernest Bianco

Mailing Address 8902 Eagle Pt. Loop Road SW

City State Zip Code
Lakewood WA 98498

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2010

Transaction ID: SA11AI.91586

Amount of Each Receipt this Period
25.00

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

Mailing Address 8902 Eagle Pt. Loop Road SW

City State Zip Code
Lakewood WA 98498

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.92357

Amount of Each Receipt this Period
100.00

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

Mailing Address P.O. Box 250

City State Zip Code
Bolton MS 39041

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2010

Transaction ID: SA11AI.87842

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 175.00

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 12 / 168
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Cheryl Bland		Date of Receipt
	Mailing Address P.O. Box 250		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 18 / 2010
	City	State	Zip Code
	Bolton	MS	39041
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.92110
Name of Employer Unemployed		Occupation Unemployed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) Roy Bland		Date of Receipt
	Mailing Address P.O. Box 250		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 19 / 2010
	City	State	Zip Code
	Bolton	MS	39041
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.87841
Name of Employer A/C Masters, Inc.		Occupation General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Roy Bland		Date of Receipt
	Mailing Address P.O. Box 250		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 18 / 2010
	City	State	Zip Code
	Bolton	MS	39041
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.92109
Name of Employer A/C Masters, Inc.		Occupation General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Kenneth Boothe		Date of Receipt MM / DD / YYYY 05 / 25 / 2010
Mailing Address 1001 East FM 700		Transaction ID: SA11AI.87419
City Big Spring	State TX	Zip Code 79720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kenneth C Boothe & Company, PC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Kenneth Boothe		Date of Receipt MM / DD / YYYY 06 / 25 / 2010
Mailing Address 1001 East FM 700		Transaction ID: SA11AI.94191
City Big Spring	State TX	Zip Code 79720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kenneth C Boothe & Company, PC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Peggy Bost		Date of Receipt MM / DD / YYYY 05 / 28 / 2010
Mailing Address 5107 Cerro Vista		Transaction ID: SA11AI.86258
City San Antonio	State TX	Zip Code 78233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	450.00
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 14 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Peggy Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 06 / 11 / 2010
Transaction ID: SA11AI.90750
Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Peggy Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 25 / 2010
Transaction ID: SA11AI.94301
Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert Botkin

Mailing Address 1202 Breakers W. Boulevard

City West Palm Beach State FL Zip Code 33411

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

Name of Employer Self-Employed Occupation Consulting Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 18 / 2010
Transaction ID: SA11AI.92846
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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 15 / 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Phil Brand		Date of Receipt
Mailing Address 6066 Churchill Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Ketchikan AK 99901		<input type="text"/> 0 4 / <input type="text"/> 2 2 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.84494
Name of Employer State of Alaska Occupation Marine Engineer		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 200.00
Aggregate Year-to-Date ▼ <input type="text"/> 250.00		

B.

Full Name (Last, First, Middle Initial) Phil Brand		Date of Receipt
Mailing Address 6066 Churchill Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Ketchikan AK 99901		<input type="text"/> 0 4 / <input type="text"/> 2 3 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.84655
Name of Employer State of Alaska Occupation Marine Engineer		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 50.00
Aggregate Year-to-Date ▼ <input type="text"/> 300.00		

C.

Full Name (Last, First, Middle Initial) Phil Brand		Date of Receipt
Mailing Address 6066 Churchill Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Ketchikan AK 99901		<input type="text"/> 0 5 / <input type="text"/> 2 3 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.88239
Name of Employer State of Alaska Occupation Marine Engineer		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 50.00
Aggregate Year-to-Date ▼ <input type="text"/> 350.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Phil Brand

Mailing Address 6066 Churchill Ct

City State Zip Code
Ketchikan AK 99901

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

Name of Employer
State of Alaska

Occupation
Marine Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2010

Transaction ID: SA11AI.93556

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Roger Cain

Mailing Address 1496 Cotaco-Florette Rd

City State Zip Code
Somerville AL 35670

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

Name of Employer
Retired

Occupation
Retired Electrical Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.96739

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Pamela Carr

Mailing Address 4610 Lea Lane

City State Zip Code
Richmond TX 77406

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

Name of Employer
Self-employed

Occupation
Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2010

Transaction ID: SA11AI.91526

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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 17 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
John Caswell
Mailing Address 2425 Parkwood Dr
City State Zip Code
Grand Prairie TX 75050
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Alford Media Services Manager of Audio Services
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 0
Transaction ID: SA11AI.82662
Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John Caswell
Mailing Address 2425 Parkwood Dr
City State Zip Code
Grand Prairie TX 75050
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Alford Media Services Manager of Audio Services
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 0
Transaction ID: SA11AI.89226
Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Patt Cavanaugh
Mailing Address 532 Ferndale Road West
City State Zip Code
Wayzata MN 55391
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0
Transaction ID: SA11AI.98205
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 800.00
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 18 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jeannie Chambers
Mailing Address 1215 NE 43rd Terrace
City State Zip Code
Kansas City MO 64116
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 05 / 12 / 2010
Transaction ID: SA11AI.86318
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Jeannie Chambers
Mailing Address 1215 NE 43rd Terrace
City State Zip Code
Kansas City MO 64116
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 12 / 2010
Transaction ID: SA11AI.91151
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Jeannie Chambers
Mailing Address 1215 NE 43rd Terrace
City State Zip Code
Kansas City MO 64116
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt 06 / 14 / 2010
Transaction ID: SA11AI.91414
Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 55.00
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 19 / 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Jeannie Chambers	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1215 NE 43rd Terrace	Transaction ID: SA11AI.97693
	City State Zip Code Kansas City MO 64116	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Sandra S. Click	Date of Receipt MM / DD / YYYY 04 / 02 / 2010
	Mailing Address 1284 Crabapple Road	Transaction ID: SA11AI.82672
	City State Zip Code Big Sandy TX 75755	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Sandra S. Click	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1284 Crabapple Road	Transaction ID: SA11AI.84666
	City State Zip Code Big Sandy TX 75755	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	55.00
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 20 / 168						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt	
	Mailing Address 1284 Crabapple Road		M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.85863
	Big Sandy	TX	75755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		275.00		

B.	Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt	
	Mailing Address 1284 Crabapple Road		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.88244
	Big Sandy	TX	75755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

C.	Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt	
	Mailing Address 1284 Crabapple Road		M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.89057
	Big Sandy	TX	75755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		325.00		

SUBTOTAL of Receipts This Page (optional)	▶	75.00
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 21 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt MM / DD / YYYY 06 / 12 / 2010
Mailing Address 1284 Crabapple Road		Transaction ID: SA11AI.91242
City Big Sandy	State TX	Zip Code 75755
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

B.

Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt MM / DD / YYYY 06 / 23 / 2010
Mailing Address 1284 Crabapple Road		Transaction ID: SA11AI.93584
City Big Sandy	State TX	Zip Code 75755
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.

Full Name (Last, First, Middle Initial) Sandra S. Click		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
Mailing Address 1284 Crabapple Road		Transaction ID: SA11AI.97459
City Big Sandy	State TX	Zip Code 75755
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional)	150.00
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 22 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Joshua Clinard
Mailing Address 7832 Woodall Road

City Norfolk State VA Zip Code 23518

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

Name of Employer US Navy Occupation QuarterMaster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 26 / 2010
Transaction ID: SA11AI.84797
 Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Joshua Clinard
Mailing Address 7832 Woodall Road

City Norfolk State VA Zip Code 23518

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

Name of Employer US Navy Occupation QuarterMaster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 05 / 26 / 2010
Transaction ID: SA11AI.88265
 Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Joshua Clinard
Mailing Address 7832 Woodall Road

City Norfolk State VA Zip Code 23518

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

Name of Employer US Navy Occupation QuarterMaster

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 06 / 26 / 2010
Transaction ID: SA11AI.94533
 Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ► 225.00

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 23 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Sandra Coffman
Mailing Address P.O. Box 10625
City State Zip Code
Fort Smith AR 72917
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired RN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 0
Transaction ID: SA11AI.86229
Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Paula Corsaro
Mailing Address 28 Rowan Avenue
City State Zip Code
Staten Island NY 10306
FEC ID number of contributing federal political committee. **C**
Name of Employer Proskauer Rosé LLP Occupation Attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 0
Transaction ID: SA11AI.83373
Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Paula Corsaro
Mailing Address 28 Rowan Avenue
City State Zip Code
Staten Island NY 10306
FEC ID number of contributing federal political committee. **C**
Name of Employer Proskauer Rosé LLP Occupation Attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0
Transaction ID: SA11AI.85951
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 325.00
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 24 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Paula Corsaro

Mailing Address 28 Rowan Avenue

City Staten Island State NY Zip Code 10306

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

Name of Employer Proskauer Rosé LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 05 / 12 / 2010
Transaction ID: SA11AI.86478
Amount of Each Receipt this Period 15.00

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

Mailing Address 28 Rowan Avenue

City Staten Island State NY Zip Code 10306

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

Name of Employer Proskauer Rosé LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 05 / 26 / 2010
Transaction ID: SA11AI.88396
Amount of Each Receipt this Period 15.00

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

Mailing Address 28 Rowan Avenue

City Staten Island State NY Zip Code 10306

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

Name of Employer Proskauer Rosé LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt 06 / 09 / 2010
Transaction ID: SA11AI.90558
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

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 25 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Paula Corsaro

Mailing Address 28 Rowan Avenue

City State Zip Code
Staten Island NY 10306

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

Name of Employer Occupation
Proskauer Rose LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.92263

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Paula Corsaro

Mailing Address 28 Rowan Avenue

City State Zip Code
Staten Island NY 10306

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

Name of Employer Occupation
Proskauer Rose LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.96748

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Robert Cosgray

Mailing Address 507 East Bell

City State Zip Code
McConnelsville OH 43756

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2010

Transaction ID: SA11AI.83857

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **40.00**

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 26 / 168
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Leslie Crawford

Mailing Address 25 CR 511

City State Zip Code
Como MS 38619

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.96813

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Carole Dowdy

Mailing Address 704 Usher St.

City State Zip Code
Mayfield KY 42066

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

Name of Employer Occupation
Dr. Donald B. Dowdy Business Manager/Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: SA11AI.86255

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ramona Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
La Quinta CA 92253

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

Name of Employer Occupation
Vintage Associates, Inc. Payroll Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.92307

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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 27 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Ramona Elkins
Mailing Address 77810 Calle Temecula
City La Quinta State CA Zip Code 92253
FEC ID number of contributing federal political committee. **C**
Name of Employer Vintage Associates, Inc. Occupation Payroll Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.97492
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Carol Enright
Mailing Address 5720 Georgia
City Groves State TX Zip Code 77619
FEC ID number of contributing federal political committee. **C**
Name of Employer Unemployed Occupation Unemployed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00
Date of Receipt 05 / 16 / 2010
Transaction ID: SA11AI.86874
Amount of Each Receipt this Period 20.10

C. Full Name (Last, First, Middle Initial)
Carol Enright
Mailing Address 5720 Georgia
City Groves State TX Zip Code 77619
FEC ID number of contributing federal political committee. **C**
Name of Employer Unemployed Occupation Unemployed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.10
Date of Receipt 06 / 02 / 2010
Transaction ID: SA11AI.89058
Amount of Each Receipt this Period 20.10

SUBTOTAL of Receipts This Page (optional) ▶ 65.20
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Carol Enright

Mailing Address 5720 Georgia

City State Zip Code
Groves TX 77619

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.20

Date of Receipt
MM / DD / YYYY
06 / 16 / 2010

Transaction ID: SA11AI.91802

Amount of Each Receipt this Period
20.10

B.

Full Name (Last, First, Middle Initial)
Gregg Esakoff

Mailing Address 818 Dakota Place

City State Zip Code
Whitefish MT 59937

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

Name of Employer Occupation
Self-Employed Engineer Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2010

Transaction ID: SA11AI.86459

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
Gregg Esakoff

Mailing Address 818 Dakota Place

City State Zip Code
Whitefish MT 59937

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

Name of Employer Occupation
Self-Employed Engineer Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2010

Transaction ID: SA11AI.94730

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2120.10**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Scott Fain
 Mailing Address 26 Hibiscus Lane
 City State Zip Code
 Warwick RI 02886
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 8 / 2 0 1 0
Transaction ID: SA11AI.94915
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scott Fain Occupation Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Janis Fitzgerald
 Mailing Address 4834 Elkhorn Hill Drive
 City State Zip Code
 Suwanee GA 30024
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 1 0
Transaction ID: SA11AI.86409
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

C. Full Name (Last, First, Middle Initial)
John Ford
 Mailing Address 3434 Edwards Mill Rd
 City State Zip Code
 Raleigh NC 27612
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 1 0
Transaction ID: SA11AI.96726
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADT Security Services Occupation Sales Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 650.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 30 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jeff Fowlkes
 Mailing Address 12035 Olympic Club Drive
 City State Zip Code
 Charlotte NC 28277
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 5 / 2 0 1 0
Transaction ID: SA11AI.83901
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Spirit Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

B. Full Name (Last, First, Middle Initial)
John Fry
 Mailing Address 7765 Dogwood
 City State Zip Code
 Germantown TN 38138
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 0 / 2 0 1 0
Transaction ID: SA11AI.84152
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ardent Music LLC Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

C. Full Name (Last, First, Middle Initial)
John Fry
 Mailing Address 7765 Dogwood
 City State Zip Code
 Germantown TN 38138
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 1 0
Transaction ID: SA11AI.85268
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ardent Music LLC Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

SUBTOTAL of Receipts This Page (optional) ► 5100.00
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 31 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
John Fry

Mailing Address 7765 Dogwood

City State Zip Code
Germantown TN 38138

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

Name of Employer Occupation
Ardent Music LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.87130

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
John Fry

Mailing Address 7765 Dogwood

City State Zip Code
Germantown TN 38138

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

Name of Employer Occupation
Ardent Music LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.89874

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
John Fry

Mailing Address 7765 Dogwood

City State Zip Code
Germantown TN 38138

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

Name of Employer Occupation
Ardent Music LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.97397

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 32 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Judy Gerren

Mailing Address 2329 Scottsdale Court

City State Zip Code
League City TX 77573

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

Name of Employer Occupation
Self-Employed Insurance sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.95088

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Roy Gilbert

Mailing Address 5410 Saddlecreek Ln.

City State Zip Code
Birmingham AL 35242

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.95611

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.87850

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

200.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Mary Goerner
Mailing Address 4173 County Road 240
City Hallettsville State TX Zip Code 77964
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 05 / 19 / 2010
Transaction ID: SA11AI.87851
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mary Goerner
Mailing Address 4173 County Road 240
City Hallettsville State TX Zip Code 77964
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00
Date of Receipt 06 / 05 / 2010
Transaction ID: SA11AI.89918
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mary Goerner
Mailing Address 4173 County Road 240
City Hallettsville State TX Zip Code 77964
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00
Date of Receipt 06 / 19 / 2010
Transaction ID: SA11AI.92150
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
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 34 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	0

Transaction ID: SA11AI.92151

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	0

Transaction ID: SA11AI.92152

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	0

Transaction ID: SA11AI.92153

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2010

Transaction ID: SA11AI.92154

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Mary Goerner

Mailing Address 4173 County Road 240

City State Zip Code
Hallettsville TX 77964

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2010

Transaction ID: SA11AI.92155

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Kathy Gordon

Mailing Address 43191 Jones Rd.

City State Zip Code
Wellington OH 44090

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 25 / 2010

Transaction ID: SA11AI.87766

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

200.00

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
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Paul Gore

Mailing Address #13 Southpark

City State Zip Code
Dalhart TX 79022

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

Name of Employer Occupation
Self-employed Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2010

Transaction ID: SA11AI.83690

Amount of Each Receipt this Period
250.00

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

Mailing Address 7629 Densmore Ave

City State Zip Code
Van Nuys CA 91406

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

Name of Employer Occupation
Graves Motorsports Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2010

Transaction ID: SA11AI.85459

Amount of Each Receipt this Period
100.00

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

Mailing Address 7629 Densmore Ave

City State Zip Code
Van Nuys CA 91406

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

Name of Employer Occupation
Graves Motorsports Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2010

Transaction ID: SA11AI.88700

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 450.00

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 37 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Charles Graves

Mailing Address 7629 Densmore Ave

City Van Nuys State CA Zip Code 91406

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

Name of Employer Graves Motorsports Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt 06 / 30 / 2010

Transaction ID: SA11AI.96689

Amount of Each Receipt this Period 100.00

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

Mailing Address 904 E South St

City Lindale State TX Zip Code 75771

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.40

Date of Receipt 04 / 21 / 2010

Transaction ID: SA11AI.84267

Amount of Each Receipt this Period 20.10

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

Mailing Address 904 E South St

City Lindale State TX Zip Code 75771

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.50

Date of Receipt 05 / 21 / 2010

Transaction ID: SA11AI.88123

Amount of Each Receipt this Period 20.10

SUBTOTAL of Receipts This Page (optional) ► 140.20

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 38 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Catherine Greenlaw

Mailing Address 904 E South St

City Lindale State TX Zip Code 75771

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.60

Date of Receipt
MM / DD / YYYY
06 / 21 / 2010

Transaction ID: SA11AI.92181

Amount of Each Receipt this Period
20.10

B.

Full Name (Last, First, Middle Initial)
Catherine Greenlaw

Mailing Address 904 E South St

City Lindale State TX Zip Code 75771

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.60

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.92345

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Sheryl Guth

Mailing Address 2315 Bristol Drive

City Carrollton State TX Zip Code 75006

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

Name of Employer American Airlines Occupation Flight Attendant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2010

Transaction ID: SA11AI.87839

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **170.10**

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 39 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Kathy Hammock

Mailing Address 140 Fairway Run

City State Zip Code
Forsyth GA 31029

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

Name of Employer Occupation
Self Employed Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86326

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Pete Hanna

Mailing Address P.O. Box 558

City State Zip Code
Fairfield AL 35064

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

Name of Employer Occupation
Hanna Steel Co Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.93191

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Carol Hansford

Mailing Address 6542 Arborcrest Lane

City State Zip Code
Loveland OH 45140

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.84827

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 40 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Carol Hansford		Date of Receipt MM / DD / YYYY 05 / 14 / 2010
Mailing Address 6542 Arborcrest Lane		Transaction ID: SA11AI.86810
City Loveland	State OH	Zip Code 45140
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Carol Hansford		Date of Receipt MM / DD / YYYY 05 / 25 / 2010
Mailing Address 6542 Arborcrest Lane		Transaction ID: SA11AI.87395
City Loveland	State OH	Zip Code 45140
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Carol Hansford		Date of Receipt MM / DD / YYYY 06 / 14 / 2010
Mailing Address 6542 Arborcrest Lane		Transaction ID: SA11AI.91345
City Loveland	State OH	Zip Code 45140
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 41 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Knute Hansston		Date of Receipt MM / DD / YYYY 05 / 19 / 2010
Mailing Address 11218 Mountain View Drive		Transaction ID: SA11AI.87886
City Madera	State CA	Zip Code 93636
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Edward Hasley		Date of Receipt MM / DD / YYYY 06 / 14 / 2010
Mailing Address 1416 Wood Street		Transaction ID: SA11AI.91344
City Texarkana	State TX	Zip Code 75501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.

Full Name (Last, First, Middle Initial) Barbara Hemphill		Date of Receipt MM / DD / YYYY 06 / 20 / 2010
Mailing Address 467 Lake Eva Marie Drive		Transaction ID: SA11AI.92169
City Raleigh	State NC	Zip Code 27603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Productive Environment In-stitute	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional)	550.00
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 42 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Barbara Hemphill

Mailing Address 467 Lake Eva Marie Drive

City Raleigh State NC Zip Code 27603

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

Name of Employer
Productive Environment In-
stitute

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2010

Transaction ID: SA11AI.92170

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Barbara Hemphill

Mailing Address 467 Lake Eva Marie Drive

City Raleigh State NC Zip Code 27603

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

Name of Employer
Productive Environment In-
stitute

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2010

Transaction ID: SA11AI.92171

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Barbara Hemphill

Mailing Address 467 Lake Eva Marie Drive

City Raleigh State NC Zip Code 27603

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

Name of Employer
Productive Environment In-
stitute

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2010

Transaction ID: SA11AI.94193

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

60.00

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 43 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Tiffany Hendry
 Mailing Address 32 E 39th St
 City New York State NY Zip Code 10016
 Date of Receipt MM / DD / YYYY 06 / 30 / 2010
Transaction ID: SA11AI.97095
 Amount of Each Receipt this Period 750.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Kipany Productions, Ltd Occupation Marketing/Media
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

B. Full Name (Last, First, Middle Initial)
Lou Higginbotham
 Mailing Address 5515 71st Street
 City Lubbock State TX Zip Code 79424
 Date of Receipt MM / DD / YYYY 06 / 07 / 2010
Transaction ID: SA11AI.90145
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

C. Full Name (Last, First, Middle Initial)
Bruce Houff
 Mailing Address P. O. BOX 55768
 City Houston State TX Zip Code 77255
 Date of Receipt MM / DD / YYYY 06 / 23 / 2010
Transaction ID: SA11AI.93630
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Houff Energy Corporation Occupation Petroleum Geologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00
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 44 / 168
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Charles F. Jenks, Jr.	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 800 Diligence Drive	Transaction ID: SA11AI.86645
	City State Zip Code Newport News VA 23606	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Certified Financial Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Joanne Kean	Date of Receipt MM / DD / YYYY 04 / 29 / 2010
	Mailing Address 720 E Ocean Ave 505W	Transaction ID: SA11AI.85290
	City State Zip Code Boynton Beach FL 33435	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Joanne Kean	Date of Receipt MM / DD / YYYY 05 / 22 / 2010
	Mailing Address 720 E Ocean Ave 505W	Transaction ID: SA11AI.88185
	City State Zip Code Boynton Beach FL 33435	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	▶	625.00
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 45 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Joanne Kean

Mailing Address 720 E Ocean Ave 505W

City State Zip Code
Boynton Beach FL 33435

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.88186

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Joanne Kean

Mailing Address 720 E Ocean Ave 505W

City State Zip Code
Boynton Beach FL 33435

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

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

Transaction ID: SA11AI.92223

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Don Kelley

Mailing Address 204 Willowbrook

City State Zip Code
Athens TX 75751

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.87736

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 46 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Don Kelley

Mailing Address 204 Willowbrook

City Athens State TX Zip Code 75751

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 04 / 2010
Transaction ID: SA11AI.89750
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Don Kelley

Mailing Address 204 Willowbrook

City Athens State TX Zip Code 75751

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 23 / 2010
Transaction ID: SA11AI.93902
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Donald Kieffer

Mailing Address 120 Rainbow dr. 2083

City Livingston State TX Zip Code 77399

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 23 / 2010
Transaction ID: SA11AI.88240
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 47 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Kyungae Kim
Mailing Address 19486 E 58th Cir
City Aurora State CO Zip Code 80019
FEC ID number of contributing federal political committee. **C**
Name of Employer University of Colorado Hospital Occupation Medical Technologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 02 / 2010
Transaction ID: SA11AI.89114
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Kincaid
Mailing Address P.O. Box 522
City Del Rio State TX Zip Code 78841
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 06 / 28 / 2010
Transaction ID: SA11AI.95358
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Larry Kirk
Mailing Address 905 Jefferson
City Berryville State AR Zip Code 72616
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 04 / 28 / 2010
Transaction ID: SA11AI.84933
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 125.00
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 48 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.85847

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.86776

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.88557

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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 49 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 11 / 2010
Transaction ID: SA11AI.91079
Amount of Each Receipt this Period 5.00

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

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 06 / 28 / 2010
Transaction ID: SA11AI.94683
Amount of Each Receipt this Period 50.00

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

Mailing Address 2033 Turk Hill Rd

City Fairport State NY Zip Code 14450

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

Name of Employer ANKOM Technology Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 29 / 2010
Transaction ID: SA11AI.85149
Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2055.00

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 50 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Barbara Lago

Mailing Address 59-055 Olomana Rd

City State Zip Code
Kamuela HI 96743

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.97719

Amount of Each Receipt this Period
100.00

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

Mailing Address 124 Thrush Avenue

City State Zip Code
Pekin IL 61554

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

Name of Employer Home School Enrichment, Inc. Occupation Editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2010

Transaction ID: SA11AI.86369

Amount of Each Receipt this Period
100.00

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

Mailing Address 124 Thrush Avenue

City State Zip Code
Pekin IL 61554

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

Name of Employer Home School Enrichment, Inc. Occupation Editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2010

Transaction ID: SA11AI.91479

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 51 / 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Jonathan Lewis	Date of Receipt MM / DD / YYYY 06 / 25 / 2010
	Mailing Address 124 Thrush Avenue	Transaction ID: SA11AI.94254
	City State Zip Code Pekin IL 61554	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Home School Enrichment, Inc.	Occupation Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

B.	Full Name (Last, First, Middle Initial) Shelby Lorenzen	Date of Receipt MM / DD / YYYY 05 / 20 / 2010
	Mailing Address 3941 Nikita Drive	Transaction ID: SA11AI.86223
	City State Zip Code Hope Mills NC 28348	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Shelby Lorenzen	Date of Receipt MM / DD / YYYY 06 / 18 / 2010
	Mailing Address 3941 Nikita Drive	Transaction ID: SA11AI.92845
	City State Zip Code Hope Mills NC 28348	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 52 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Terry Luedtke
Mailing Address P.O. Box 1660
City Brenham State TX Zip Code 77834
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Livestock Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 11 / 2010
Transaction ID: SA11AI.98437
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Gilbert A. Mathews
Mailing Address 2703 Woods Trail S
City Burnsville State MN Zip Code 55337
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 05 / 12 / 2010
Transaction ID: SA11AI.86355
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Gilbert A. Mathews
Mailing Address 2703 Woods Trail S
City Burnsville State MN Zip Code 55337
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 06 / 11 / 2010
Transaction ID: SA11AI.90887
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00
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 53 / 168
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Diana Matthews

Mailing Address 203 E. College St.

City State Zip Code
Whiteville NC 28472

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

Name of Employer Columbus Pediatrics Occupation Spanish Interpreter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2010

Transaction ID: SA11AI.95130

Amount of Each Receipt this Period
 100.00

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

Mailing Address 1215 Danbury Road

City State Zip Code
Houston TX 77055

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

Name of Employer Dean & Draper Insurance Agency Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 07 / 2010

Transaction ID: SA11AI.90121

Amount of Each Receipt this Period
 250.00

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

Mailing Address 159 N 4258 RD

City State Zip Code
Pryor OK 74361

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

Name of Employer MetLife Occupation Client Retention

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2010

Transaction ID: SA11AI.93564

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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 54 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
David Middleton
 Mailing Address 227 N. Tranquil Path Drive.
 City State Zip Code
 Spring TX 77380
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 8 / 2 0 1 0
Transaction ID: SA11AI.86952
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Garment Business Owner
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
Loretta Neal
 Mailing Address 1301 Ave I
 City State Zip Code
 Anson TX 79501
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 1 0
Transaction ID: SA11AI.86449
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

C. Full Name (Last, First, Middle Initial)
Loretta Neal
 Mailing Address 1301 Ave I
 City State Zip Code
 Anson TX 79501
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 1 0
Transaction ID: SA11AI.88427
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 325.00
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 55 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Loretta Neal

Mailing Address 1301 Ave I

City State Zip Code
Anson TX 79501

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.91141

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Loretta Neal

Mailing Address 1301 Ave I

City State Zip Code
Anson TX 79501

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

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

Transaction ID: SA11AI.91144

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
James Neff

Mailing Address 23988 Zion Ave. P.O.Box 189
P.O.Box 189

City State Zip Code
Winsted MN 55395

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.94663

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ►

200.00

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 56 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
R. Nelson

Mailing Address 9008 River Ridge Drive

City State Zip Code
Texarkana TX 75503

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2010

Transaction ID: SA11AI.90109

Amount of Each Receipt this Period
500.00

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

Mailing Address 12 East Madison

City State Zip Code
Pittsboro NC 27312

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.96701

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
F M Norwich

Mailing Address 89 Rainey Street

City State Zip Code
Austin TX 78701

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2010

Transaction ID: SA11AI.97220

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 57 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jean Overton
Mailing Address 1735 Meiers Ct. N.W.
City Cedar Rapids State IA Zip Code 52405
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 04 / 25 / 2010
Transaction ID: SA11AI.84762
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Jean Overton
Mailing Address 1735 Meiers Ct. N.W.
City Cedar Rapids State IA Zip Code 52405
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 05 / 25 / 2010
Transaction ID: SA11AI.87452
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Jean Overton
Mailing Address 1735 Meiers Ct. N.W.
City Cedar Rapids State IA Zip Code 52405
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 06 / 23 / 2010
Transaction ID: SA11AI.93784
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
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 58 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Jean Overton

Mailing Address 1735 Meiers Ct. N.W.

City State Zip Code
Cedar Rapids IA 52405

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.94171

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Larry Payton

Mailing Address 5303 E 79th St

City State Zip Code
Tulsa OK 74136

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

Name of Employer Occupation
Celebrity Attractions President/CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.85947

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Thomas Quisenberry

Mailing Address 1215 Broadview Loop

City State Zip Code
Los Lunas NM 87031

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.89206

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5300.00

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 59 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Charles Redfield

Mailing Address 5129 Creek Drive

City State Zip Code
Western Springs IL 60558

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.94566

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
David Rhodes

Mailing Address 459 Winding Way

City State Zip Code
Covington VA 24426

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

Name of Employer Occupation
MeadWestvaco Tour Instrument Mechanic

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.97672

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Eugene Rhodes

Mailing Address 3900 Park Green Drive

City State Zip Code
Corona Del Mar CA 92625

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

Name of Employer Occupation
Rhodes Development Co. Real Estate

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.84929

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ►

225.00

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 60 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Eugene Rhodes

Mailing Address 3900 Park Green Drive

City State Zip Code
Corona Del Mar CA 92625

FEC ID number of contributing federal political committee. C

Name of Employer Rhodes Development Co. Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2010

Transaction ID: SA11AI.88554

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Eugene Rhodes

Mailing Address 3900 Park Green Drive

City State Zip Code
Corona Del Mar CA 92625

FEC ID number of contributing federal political committee. C

Name of Employer Rhodes Development Co. Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 28 / 2010

Transaction ID: SA11AI.94680

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
David Rue

Mailing Address 115 Wilson Drive

City State Zip Code
Xenia OH 45385

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 28 / 2010

Transaction ID: SA11AI.94745

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 225.00

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 61 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Joan Schmidt		Date of Receipt MM / DD / YYYY 06 / 25 / 2010
Mailing Address 4506 Providence Point Place SE		Transaction ID: SA11AI.94304
City Issaquah	State WA	Zip Code 98029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Steven Schneider		Date of Receipt MM / DD / YYYY 06 / 30 / 2010
Mailing Address 1800 S. Washington		Transaction ID: SA11AI.96731
City Amarillo	State TX	Zip Code 79102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Steven C. Schneider, PHD, PLLC	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Roger Sherman		Date of Receipt MM / DD / YYYY 04 / 05 / 2010
Mailing Address 1124 12th Ave NW		Transaction ID: SA11AI.82809
City Arab	State AL	Zip Code 35016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Lockheed Martin Space Systems	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 62 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Roger Sherman
 Mailing Address 1124 12th Ave NW
 City Arab State AL Zip Code 35016
 Date of Receipt 05 / 05 / 2010
Transaction ID: SA11AI.85930
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Lockheed Martin Space Systems Occupation Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

B. Full Name (Last, First, Middle Initial)
Roger Sherman
 Mailing Address 1124 12th Ave NW
 City Arab State AL Zip Code 35016
 Date of Receipt 06 / 05 / 2010
Transaction ID: SA11AI.89885
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Lockheed Martin Space Systems Occupation Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Full Name (Last, First, Middle Initial)
Frances Shuler
 Mailing Address 1031 Wagon Wheel Court
 City Gardnerville State NV Zip Code 89460
 Date of Receipt 05 / 28 / 2010
Transaction ID: SA11AI.86257
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) ► 700.00
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 63 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
George Singleton

Mailing Address p o box 717

City State Zip Code
waxahachie TX 75168

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

Name of Employer Occupation
CNB OF TEXAS Commercial Banker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11AI.83305

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
Justin Stanley

Mailing Address 313 Leonard Hunt Road

City State Zip Code
Leesville LA 71446

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

Name of Employer Occupation
First National Bank DeRid-der Assistant VP/Loan Officer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.90324

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Justin Stanley

Mailing Address 313 Leonard Hunt Road

City State Zip Code
Leesville LA 71446

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

Name of Employer Occupation
First National Bank DeRid-der Assistant VP/Loan Officer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.90325

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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 64 / 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

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

Name of Employer T.J.Hicks Lumber Co. Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.82409

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

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

Name of Employer T.J.Hicks Lumber Co. Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.85840

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

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

Name of Employer T.J.Hicks Lumber Co. Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.89043

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 65 / 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Anne Stevenson	Date of Receipt MM / DD / YYYY 05 / 12 / 2010
	Mailing Address 403 Nighthawk Court	Transaction ID: SA11AI.86539
	City State Zip Code Sugar Land TX 77478	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Anne Stevenson	Date of Receipt MM / DD / YYYY 06 / 06 / 2010
	Mailing Address 403 Nighthawk Court	Transaction ID: SA11AI.89975
	City State Zip Code Sugar Land TX 77478	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Susan Taylor	Date of Receipt MM / DD / YYYY 04 / 21 / 2010
	Mailing Address P. O. Box 26	Transaction ID: SA11AI.84304
	City State Zip Code Calvert AL 36513	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Taylor Services, Inc. Bookkeeper	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	900.00
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 66 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Wilfred Templeton
Mailing Address 323 Ben Franklin Dr.
City Sarasota State FL Zip Code 34236
FEC ID number of contributing federal political committee. **C**
Name of Employer Ft. Myers Toyota Occupation Auto Dealer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 05 / 28 / 2010
Transaction ID: SA11AI.86253
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Gary Thomason
Mailing Address 501 W. Kamm Ave.
City Kingsburg State CA Zip Code 93631
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00
Date of Receipt 04 / 27 / 2010
Transaction ID: SA11AI.84902
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Gary Thomason
Mailing Address 501 W. Kamm Ave.
City Kingsburg State CA Zip Code 93631
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 232.00
Date of Receipt 04 / 29 / 2010
Transaction ID: SA11AI.85351
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
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 67 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Gary Thomason
Mailing Address 501 W. Kamm Ave.
City Kingsburg State CA Zip Code 93631
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.00
Date of Receipt 05 / 01 / 2010
Transaction ID: SA11AI.85862
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
John B. Thomson
Mailing Address 3144 Doral Drive
City Port Orange State FL Zip Code 32128
FEC ID number of contributing federal political committee. **C**
Name of Employer NetJets Occupation Pilot
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 04 / 13 / 2010
Transaction ID: SA11AI.83664
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Eve Tomassini
Mailing Address 3075 Leeds Rd.
City Columbus State TX Zip Code 43221
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 06 / 23 / 2010
Transaction ID: SA11AI.93650
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
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 68 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Bruce Travis

Mailing Address 720 Haywood Cedar Grove Rd

City Glasgow State KY Zip Code 42141

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 22 / 2010
Transaction ID: SA11AI.84449
Amount of Each Receipt this Period: 125.00

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

Mailing Address 720 Haywood Cedar Grove Rd

City Glasgow State KY Zip Code 42141

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 22 / 2010
Transaction ID: SA11AI.88174
Amount of Each Receipt this Period: 100.00

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

Mailing Address 720 Haywood Cedar Grove Rd

City Glasgow State KY Zip Code 42141

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 05 / 22 / 2010
Transaction ID: SA11AI.88175
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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 69 / 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Bruce Travis		Date of Receipt MM / DD / YYYY 06 / 22 / 2010
Mailing Address 720 Haywood Cedar Grove Rd		Transaction ID: SA11AI.92214
City Glasgow	State KY	Zip Code 42141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

B.

Full Name (Last, First, Middle Initial) Bruce Travis		Date of Receipt MM / DD / YYYY 06 / 22 / 2010
Mailing Address 720 Haywood Cedar Grove Rd		Transaction ID: SA11AI.92215
City Glasgow	State KY	Zip Code 42141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Meredith Turner		Date of Receipt MM / DD / YYYY 06 / 03 / 2010
Mailing Address 3050 Margaret Mitchell Dr Unit 31		Transaction ID: SA11AI.89351
City Atlanta	State GA	Zip Code 30327
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer 24/7 Gateway, LLC	Occupation Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
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 70 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Meredith Turner

Mailing Address 3050 Margaret Mitchell Dr
Unit 31

City Atlanta State GA Zip Code 30327

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

Name of Employer 24/7 Gateway, LLC Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 06 / 23 / 2010
Transaction ID: SA11AI.93624
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Ronald Van Putte

Mailing Address 111 Sleepy Oaks Road NW

City Fort Walton Beach State FL Zip Code 32548

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2010
Transaction ID: SA11AI.96780
Amount of Each Receipt this Period 100.00

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

Mailing Address 14090 SW Freddway
Suite 300

City Sugarland State TX Zip Code 77478

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

Name of Employer Self-Employed Occupation Clinical Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2010
Transaction ID: SA11AI.86970
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 375.00

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 71 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Darryl Waltisperger

Mailing Address 1600 Bench Trail

City State Zip Code
Schertz TX 78154

FEC ID number of contributing federal political committee. C

Name of Employer City of San Antonio Occupation Fire Fighter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 25 / 2010

Transaction ID: SA11AI.87702

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Darryl Waltisperger

Mailing Address 1600 Bench Trail

City State Zip Code
Schertz TX 78154

FEC ID number of contributing federal political committee. C

Name of Employer City of San Antonio Occupation Fire Fighter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 03 / 2010

Transaction ID: SA11AI.89294

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Darryl Waltisperger

Mailing Address 1600 Bench Trail

City State Zip Code
Schertz TX 78154

FEC ID number of contributing federal political committee. C

Name of Employer City of San Antonio Occupation Fire Fighter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 22 / 2010

Transaction ID: SA11AI.92467

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 125.00

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 72 / 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Darryl Waltisperger	Date of Receipt MM / DD / YYYY 06 / 24 / 2010
	Mailing Address 1600 Bench Trail	Transaction ID: SA11AI.94087
	City State Zip Code Schertz TX 78154	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer City of San Antonio Occupation Fire Fighter Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 375.00	

B.	Full Name (Last, First, Middle Initial) Darryl Waltisperger	Date of Receipt MM / DD / YYYY 06 / 30 / 2010
	Mailing Address 1600 Bench Trail	Transaction ID: SA11AI.96947
	City State Zip Code Schertz TX 78154	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer City of San Antonio Occupation Fire Fighter Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 425.00	

C.	Full Name (Last, First, Middle Initial) Donna Wheeler	Date of Receipt MM / DD / YYYY 06 / 10 / 2010
	Mailing Address 3740 Chimney Ridge	Transaction ID: SA11AI.90643
	City State Zip Code Waco TX 76708	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Waco Neonatal Group Occupation Accountant/Office Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	600.00
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 73 / 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
John Williams, Jr.
Mailing Address 2202 Broadfield Run
City Duluth State GA Zip Code 30097
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 06 / 01 / 2010
Transaction ID: SA11AI.97790
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Kelly Williams
Mailing Address 111 Cattle Trail Way
City Georgetown State TX Zip Code 78633
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired Trial Lawyer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 05 / 20 / 2010
Transaction ID: SA11AI.86227
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Susan Williams
Mailing Address 867 Main Street
City Gibsland State LA Zip Code 71028
FEC ID number of contributing federal political committee. **C**
Name of Employer Gibsland Bank and Trust Occupation Bank Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 04 / 20 / 2010
Transaction ID: SA11AI.84048
Amount of Each Receipt this Period 5000.00
Reattribution Requested

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 74 / 168

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Matt Wisenbaker

Mailing Address 724 Mountainview

City State Zip Code
Montgomery TX 77356

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

Name of Employer
Wisenbaker Builder Services

Occupation
Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 04 / 2010

Transaction ID: SA11AI.89618

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
David Wood

Mailing Address 5586 Eichman Rd.

City State Zip Code
Von Army TX 78073

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

Name of Employer
Wood Medical Group, PA

Occupation
Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 21 / 2010

Transaction ID: SA11AI.88124

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
David Wood

Mailing Address 5586 Eichman Rd.

City State Zip Code
Von Army TX 78073

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

Name of Employer
Wood Medical Group, PA

Occupation
Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 21 / 2010

Transaction ID: SA11AI.92180

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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 75 / 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Robert W. Wright

Mailing Address P.O. Box 437

City State Zip Code
Charleston TN 37310

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

Name of Employer Occupation
Wright Bros. Construction Co. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.98681

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	47540.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 168
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Team Vander Plaats

Mailing Address P.O. Box 2010

City State Zip Code
Sioux City IA 51104

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 9 / 2 0 1 0

Transaction ID: SA16.98720

Amount of Each Receipt this Period
1000.00

Refund of Prior Contribution

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**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)

PAGE 77 / 168

<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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.88792
	Mailing Address Dept. CH19172	Date of Disbursement MM / DD / YYYY 04 / 14 / 2010
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 10.92
	Purpose of Disbursement Blackberry Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.88812
	Mailing Address Dept. CH19172	Date of Disbursement MM / DD / YYYY 04 / 26 / 2010
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 158.26
	Purpose of Disbursement Blackberry Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.88852
	Mailing Address Dept. CH19172	Date of Disbursement MM / DD / YYYY 05 / 17 / 2010
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 10.21
	Purpose of Disbursement Blackberry Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	179.39
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)

PAGE 78 / 168

<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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.88880
	Mailing Address Dept. CH19172	Date of Disbursement 06 / 01 / 2010
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 148.31
	Purpose of Disbursement Blackberry Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.88930
	Mailing Address Dept. CH19172	Date of Disbursement 06 / 21 / 2010
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 148.31
	Purpose of Disbursement Blackberry Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Argenta Computer Care, LLC	Transaction ID: SB21B.88811
	Mailing Address 401 Main Street #206	Date of Disbursement 04 / 26 / 2010
	City North Little Rock State AR Zip Code 72114	Amount of Each Disbursement this Period 240.00
	Purpose of Disbursement Office Expense - Set up for MAC Computer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	536.62
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Arkansas Dept. of Finance & Administration</p> <p>Mailing Address P.O. Box 9941</p> <p>City Little Rock State AR Zip Code 72203-9941</p> <p>Purpose of Disbursement Estimated Tax Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88793</p> <p>Date of Disbursement 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 690.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address P.O. Box 650661</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88782</p> <p>Date of Disbursement 04 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 392.71</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address P.O. Box 650661</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88831</p> <p>Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 322.64</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1405.35

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)

PAGE 80 / 168

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.88917
	Mailing Address P.O. Box 650661	Date of Disbursement MM / DD / YYYY 06 / 14 / 2010
	City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period 294.99
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB21B.88781
	Mailing Address P.O. Box 6463	Date of Disbursement MM / DD / YYYY 04 / 13 / 2010
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 303.27
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB21B.88854
	Mailing Address P.O. Box 6463	Date of Disbursement MM / DD / YYYY 05 / 17 / 2010
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 378.45
	Purpose of Disbursement Telephone Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	976.71
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address P.O. Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88931</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="373.36"/></p>
<p>B. Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88791</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="786.78"/></p>
<p>C. Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Check Issued on March 30, 2010 Voided</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98693</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-339.30"/></p>

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88836</p> <p>Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 339.30</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88853</p> <p>Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 77.43</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88894</p> <p>Date of Disbursement 06 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 2032.20</p>

SUBTOTAL of Disbursements This Page (optional)	2448.93
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88916</p> <p>Date of Disbursement 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1222.11</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88933</p> <p>Date of Disbursement 06 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 2158.17</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98665</p> <p>Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1113.41</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4493.69

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Capitol Resources, Inc.</p> <p>Mailing Address 3213 Duke Street #672</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Telemarketing - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98666 Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 3560.46</p>
<p>B. Full Name (Last, First, Middle Initial) ccAdvertising</p> <p>Mailing Address 13800 Coppermine Road</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Advertising - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88834 Date of Disbursement 05 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ccAdvertising</p> <p>Mailing Address 13800 Coppermine Road</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement Advertising - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88882 Date of Disbursement 06 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13560.46

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) ccAdvertising	Transaction ID: SB21B.98706
	Mailing Address 13800 Coppermine Road	Date of Disbursement 06 / 01 / 2010
	City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Advertising - PAC Fundraising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.88746
	Mailing Address 59 Belmont Drive	Date of Disbursement 04 / 01 / 2010
	City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period 2060.00
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.88784
	Mailing Address 59 Belmont Drive	Date of Disbursement 04 / 15 / 2010
	City Little Rock State AR Zip Code 72204	Amount of Each Disbursement this Period 2060.00
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	9120.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.88820 Date of Disbursement 04 / 30 / 2010
	Mailing Address 59 Belmont Drive	Amount of Each Disbursement this Period 2060.00
	City Little Rock State AR Zip Code 72204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.88841 Date of Disbursement 05 / 14 / 2010
	Mailing Address 59 Belmont Drive	Amount of Each Disbursement this Period 2060.00
	City Little Rock State AR Zip Code 72204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Judith A. Crouch	Transaction ID: SB21B.88870 Date of Disbursement 05 / 28 / 2010
	Mailing Address 59 Belmont Drive	Amount of Each Disbursement this Period 2060.00
	City Little Rock State AR Zip Code 72204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6180.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Judith A. Crouch Mailing Address 59 Belmont Drive City Little Rock State AR Zip Code 72204 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88902 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 2060.00
B.	Full Name (Last, First, Middle Initial) Delta Trust & Bank Mailing Address 11700 Cantrell Road City Little Rock State AR Zip Code 72222 Purpose of Disbursement Employee Benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.98703 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 1 0	Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) Delta Trust & Bank Mailing Address 11700 Cantrell Road City Little Rock State AR Zip Code 72222 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88897 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 1 0	Amount of Each Disbursement this Period 27.00

SUBTOTAL of Disbursements This Page (optional)	4387.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Delta Trust & Bank	Transaction ID: SB21B.88899
	Mailing Address 11700 Cantrell Road	Date of Disbursement 06 / 09 / 2010
	City Little Rock State AR Zip Code 72222	Amount of Each Disbursement this Period 108.00
	Purpose of Disbursement Bank Charges	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Direct Response Strategies	Transaction ID: SB21B.88936
	Mailing Address 4025 Ellicott Street	Date of Disbursement 06 / 23 / 2010
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period 2093.00
	Purpose of Disbursement Direct Mail Postage - PAC Fundraising	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Kristin Dulin	Transaction ID: SB21B.88758
	Mailing Address 629 St. James Place	Date of Disbursement 04 / 09 / 2010
	City Coppell State TX Zip Code 75019	Amount of Each Disbursement this Period 926.80
	Purpose of Disbursement Health Insurance Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3127.80
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Kristin Dulin	Transaction ID: SB21B.88759
	Mailing Address 629 St. James Place	Date of Disbursement MM / DD / YYYY 04 / 09 / 2010
	City Coppel State TX Zip Code 75019	Amount of Each Disbursement this Period 1838.08
	Purpose of Disbursement Travel Reimb. - no itemization required	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kristin Dulin	Transaction ID: SB21B.88775
	Mailing Address 629 St. James Place	Date of Disbursement MM / DD / YYYY 04 / 09 / 2010
	City Coppel State TX Zip Code 75019	Amount of Each Disbursement this Period 1102.70
	Purpose of Disbursement Telephone Service Reimbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88747
	Mailing Address 2507 Rigby Drive	Date of Disbursement MM / DD / YYYY 04 / 01 / 2010
	City Columbia State SC Zip Code 29204	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7940.78
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88785 Date of Disbursement 04 / 15 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88821 Date of Disbursement 04 / 30 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88842 Date of Disbursement 05 / 14 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88856 Date of Disbursement 05 / 17 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 544.62
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Office Expense & Travel Expense Reimbursements	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88871 Date of Disbursement 05 / 28 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88919 Date of Disbursement 06 / 14 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 191.02
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Insurance Reimbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5735.64
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.88903 Date of Disbursement 06 / 15 / 2010
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) GSL Solutions, Inc.	Transaction ID: SB21B.98596 Date of Disbursement 04 / 26 / 2010
	Mailing Address 1411 N. Westshore Boulevard Suite 204	Amount of Each Disbursement this Period 7018.50
	City Tampa State FL Zip Code 33607	
	Purpose of Disbursement Web Development/Hosting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) GSL Solutions, Inc.	Transaction ID: SB21B.98597 Date of Disbursement 06 / 01 / 2010
	Mailing Address 1411 N. Westshore Boulevard Suite 204	Amount of Each Disbursement this Period 5340.58
	City Tampa State FL Zip Code 33607	
	Purpose of Disbursement Web Development/Hosting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	17359.08
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) GSL Solutions, Inc.	Transaction ID: SB21B.98598 Date of Disbursement
	Mailing Address 1411 N. Westshore Boulevard Suite 204	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Tampa State FL Zip Code 33607	Amount of Each Disbursement this Period
	Purpose of Disbursement Web Development/Hosting	<input type="text" value="3589.63"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88748 Date of Disbursement
	Mailing Address 3226 Stonepine	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1201.67"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88789 Date of Disbursement
	Mailing Address 3226 Stonepine	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period
	Purpose of Disbursement Health & Dental Insurance Reimbursements	<input type="text" value="130.75"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4922.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88786
	Mailing Address 3226 Stonepine	Date of Disbursement MM / DD / YYYY 04 / 15 / 2010
	City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period 1201.67
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88822
	Mailing Address 3226 Stonepine	Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period 1201.67
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88829
	Mailing Address 3226 Stonepine	Date of Disbursement MM / DD / YYYY 05 / 09 / 2010
	City State Zip Code Bryant AR 72022	Amount of Each Disbursement this Period 130.75
	Purpose of Disbursement Health & Dental Insurance Reimbursements	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2534.09
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88843 Date of Disbursement 05 / 14 / 2010
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1201.67
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88872 Date of Disbursement 05 / 28 / 2010
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1201.67
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.88914 Date of Disbursement 06 / 14 / 2010
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 130.75
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Health & Dental Insurance Reimbursements	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2534.09
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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Katherine E. Harris

Transaction ID: SB21B.88904
Date of Disbursement

Mailing Address 3226 Stonepine

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

City State Zip Code
Bryant AR 72022

Amount of Each Disbursement this Period

1201.67

Purpose of Disbursement
Payroll

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Holtzman Vogel, PLLC

Transaction ID: SB21B.88813
Date of Disbursement

Mailing Address 45 North Hill Drive
Suite 100

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

City State Zip Code
Warrenton VA 20186

Amount of Each Disbursement this Period

1083.75

Purpose of Disbursement
Consulting - Legal

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Holtzman Vogel, PLLC

Transaction ID: SB21B.88883
Date of Disbursement

Mailing Address 45 North Hill Drive
Suite 100

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

City State Zip Code
Warrenton VA 20186

Amount of Each Disbursement this Period

1968.75

Purpose of Disbursement
Consulting - Legal

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4254.17

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 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC Mailing Address 45 North Hill Drive Suite 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Consulting - Legal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88918 Date of Disbursement 06 / 14 / 2010 Amount of Each Disbursement this Period 295.00
B.	Full Name (Last, First, Middle Initial) Lauren Huckabee Mailing Address #2 Cedar Point Court City Little Rock State AR Zip Code 72211 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88844 Date of Disbursement 05 / 14 / 2010 Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) Lauren Huckabee Mailing Address #2 Cedar Point Court City Little Rock State AR Zip Code 72211 Purpose of Disbursement Blackberry Service & Insurance Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88855 Date of Disbursement 05 / 17 / 2010 Amount of Each Disbursement this Period 375.00

SUBTOTAL of Disbursements This Page (optional) ▶

2170.00

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.88873
	Mailing Address #2 Cedar Point Court	Date of Disbursement MM / DD / YYYY 05 / 28 / 2010
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.88912
	Mailing Address #2 Cedar Point Court	Date of Disbursement MM / DD / YYYY 06 / 14 / 2010
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period 375.00
	Purpose of Disbursement Insurance & Blackberry Service Reimbursements	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.88905
	Mailing Address #2 Cedar Point Court	Date of Disbursement MM / DD / YYYY 06 / 15 / 2010
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3375.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB21B.88794 Date of Disbursement																			
	Mailing Address P.O. Box 12192	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	4		2	0	1	0												
	City Covington State KY Zip Code 41012	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Estimated Tax - First Quarter	<table border="1"><tr><td>2985.00</td></tr></table>	2985.00																		
2985.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB21B.88921 Date of Disbursement																			
	Mailing Address P.O. Box 12192	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	0												
	City Covington State KY Zip Code 41012	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Estimated Tax - Second Quarter	<table border="1"><tr><td>3980.00</td></tr></table>	3980.00																		
3980.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) J&K Aviation	Transaction ID: SB21B.88943 Date of Disbursement																			
	Mailing Address P.O. Box 1228	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	1	0												
	City Mountain View State AR Zip Code 72560	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel	<table border="1"><tr><td>3500.00</td></tr></table>	3500.00																		
3500.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>10465.00</td></tr></table>	10465.00
10465.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88749 Date of Disbursement 04 / 01 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88787 Date of Disbursement 04 / 15 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88823 Date of Disbursement 04 / 30 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5253.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88845 Date of Disbursement 05 / 14 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88874 Date of Disbursement 05 / 28 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.88906 Date of Disbursement 06 / 15 / 2010
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5253.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) JPMS Cox	Transaction ID: SB21B.98593 Date of Disbursement 04 / 14 / 2010
	Mailing Address 11300 Cantrell Road Suite 301 City Little Rock State AR Zip Code 72212 Purpose of Disbursement Accounting & Compliance Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 6000.00

B.	Full Name (Last, First, Middle Initial) JPMS Cox	Transaction ID: SB21B.98594 Date of Disbursement 05 / 09 / 2010
	Mailing Address 11300 Cantrell Road Suite 301 City Little Rock State AR Zip Code 72212 Purpose of Disbursement Accounting & Compliance Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 6000.00

C.	Full Name (Last, First, Middle Initial) JPMS Cox	Transaction ID: SB21B.98595 Date of Disbursement 06 / 01 / 2010
	Mailing Address 11300 Cantrell Road Suite 301 City Little Rock State AR Zip Code 72212 Purpose of Disbursement Accounting & Compliance Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 6000.00

SUBTOTAL of Disbursements This Page (optional)	▶	18000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) LCM Strategies	Transaction ID: SB21B.88810 Date of Disbursement 04 / 26 / 2010
	Mailing Address 3409 Hopkins Street	Amount of Each Disbursement this Period 3500.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Direct Mail - PAC Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) LCM Strategies	Transaction ID: SB21B.88878 Date of Disbursement 06 / 01 / 2010
	Mailing Address 3409 Hopkins Street	Amount of Each Disbursement this Period 4500.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Direct Mail - PAC Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) LCM Strategies	Transaction ID: SB21B.88932 Date of Disbursement 06 / 21 / 2010
	Mailing Address 3409 Hopkins Street	Amount of Each Disbursement this Period 4500.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Direct Mail - PAC Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ► 12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Charles Levine	Transaction ID: SB21B.98679 Date of Disbursement 04 / 26 / 2010
	Mailing Address P.O. BOx 7834	Amount of Each Disbursement this Period -2500.00
	City Jerusalem State ZZ Zip Code	
	Purpose of Disbursement Check Written on 01/27/10 Voided	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Metro	Transaction ID: SB21B.88830 Date of Disbursement 05 / 09 / 2010
	Mailing Address 124 West Capitol Ave.	Amount of Each Disbursement this Period 1057.60
	City Little Rock State AR Zip Code 72201	
	Purpose of Disbursement Postage	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Optus, Inc.	Transaction ID: SB21B.88835 Date of Disbursement 05 / 09 / 2010
	Mailing Address P.O. Box 2503	Amount of Each Disbursement this Period 398.62
	City Jonesboro State AR Zip Code 72402	
	Purpose of Disbursement Telephone Equipment Rental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	-1043.78
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Optus, Inc.</p> <p>Mailing Address P.O. Box 2503</p> <p>City Jonesboro State AR Zip Code 72402</p> <p>Purpose of Disbursement Telephone Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88884</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="199.31"/></p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98524</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1182.96"/></p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88788</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="155.23"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.98529 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 1072.86
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.98531 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 886.09
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.98533 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 14.57

SUBTOTAL of Disbursements This Page (optional) ▶

1973.52

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.88828 Date of Disbursement 05 / 09 / 2010
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 166.12 Category/Type

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.98534 Date of Disbursement 05 / 14 / 2010
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 993.84 Category/Type

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.98537 Date of Disbursement 05 / 28 / 2010
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 993.21 Category/Type

SUBTOTAL of Disbursements This Page (optional)	2153.17
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88907</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 89.01</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88908</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 85.51</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98538</p> <p>Date of Disbursement 06 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 948.18</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1122.70

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88741 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="127.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88750 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="35.14"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88751 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="17.35"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="179.69"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88752 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="15.17"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88753 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="17.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88754 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="5.98"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="38.69"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88755 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="4.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88756 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="15.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88757 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="93.81"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="113.43"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88777 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="85.76"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88778 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="23.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88779 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="69.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="178.63"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88780 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="8.24"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88783 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="13.63"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88798 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="188.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="210.65"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88799 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="23.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88800 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="8.07"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88801 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="5.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="36.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88802 Date of Disbursement 04 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 12.87</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88803 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 215.27</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88804 Date of Disbursement 04 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 109.25</p>

SUBTOTAL of Disbursements This Page (optional)	337.39
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88805 Date of Disbursement 04 / 22 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 113.72

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88806 Date of Disbursement 04 / 23 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 41.25

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88807 Date of Disbursement 04 / 24 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 20.14

SUBTOTAL of Disbursements This Page (optional)	175.11
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88808 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="17.65"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88809 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="9.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88814 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="39.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="66.82"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88815 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="122.19"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88819 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="180.02"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98683 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="163.31"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="465.52"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98684 Date of Disbursement 05 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 19.95</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98685 Date of Disbursement 05 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 16.13</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98686 Date of Disbursement 05 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 15.09</p>

SUBTOTAL of Disbursements This Page (optional) ▶

51.17

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98687 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="3.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98688 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="9.72"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98689 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="112.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="125.82"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98690 Date of Disbursement 05 / 07 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5.05 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98691 Date of Disbursement 05 / 08 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 4.28 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98692 Date of Disbursement 05 / 09 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 6.17 Category/Type

SUBTOTAL of Disbursements This Page (optional)	15.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88837 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="8.19"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88838 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="5.53"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88839 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="209.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="223.49"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88840 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="138.53"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88848 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="23.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88849 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="9.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="171.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88850 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="13.43"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88851 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="14.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88857 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="45.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="72.74"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88858 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="59.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88859 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="112.13"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88860 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="21.28"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="192.41"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88861 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="34.84"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88862 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="21.57"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88863 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="169.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="226.10"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88865 Date of Disbursement 05 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 198.08</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88867 Date of Disbursement 05 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 83.43</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88868 Date of Disbursement 05 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 62.48</p>

SUBTOTAL of Disbursements This Page (optional)	343.99
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88869
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 05 / 28 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 62.48
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88875
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 05 / 29 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 8.52
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88876
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 05 / 30 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 16.00
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	87.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98525 Date of Disbursement 05 / 31 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5.40

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88877 Date of Disbursement 06 / 01 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 10.83

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88886 Date of Disbursement 06 / 02 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 64.17

SUBTOTAL of Disbursements This Page (optional)	80.40
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88887 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="203.46"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88888 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="144.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88889 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="51.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="399.39"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88890 Date of Disbursement 06 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 26.77</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88891 Date of Disbursement 06 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 101.95</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88896 Date of Disbursement 06 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 91.43</p>

SUBTOTAL of Disbursements This Page (optional) ▶

220.15

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88898 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="173.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88900 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="41.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88901 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="201.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="416.29"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88909
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 06 / 12 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 72.63
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88910
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 06 / 13 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 28.77
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.88911
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement 06 / 14 / 2010
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 59.46
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	160.86
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88920 Date of Disbursement 06 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 154.94</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88924 Date of Disbursement 06 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 113.18</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88925 Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 48.99</p>

SUBTOTAL of Disbursements This Page (optional)	317.11
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88926 Date of Disbursement 06 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 21.91</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88927 Date of Disbursement 06 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 11.63</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88928 Date of Disbursement 06 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 13.05</p>

SUBTOTAL of Disbursements This Page (optional)	46.59
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88929</p> <p>Date of Disbursement 06 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 18.46</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88934</p> <p>Date of Disbursement 06 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 173.38</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88935</p> <p>Date of Disbursement 06 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 232.61</p>

SUBTOTAL of Disbursements This Page (optional) ▶

424.45

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88938</p> <p>Date of Disbursement 06 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 129.80</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88940</p> <p>Date of Disbursement 06 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 198.39</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88941</p> <p>Date of Disbursement 06 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 47.93</p>

SUBTOTAL of Disbursements This Page (optional) ▶

376.12

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88942 Date of Disbursement 06 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 25.90</p>
<p>B. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98526 Date of Disbursement 06 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 215.16</p>
<p>C. Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98527 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 145.84</p>

SUBTOTAL of Disbursements This Page (optional) ▶

386.90

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.98528 Date of Disbursement 06 / 30 / 2010
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 582.95

B.	Full Name (Last, First, Middle Initial) PC Assistance, Inc.	Transaction ID: SB21B.88892 Date of Disbursement 06 / 07 / 2010
	Mailing Address 3200 S. Shackelford Suite 9 City Little Rock State AR Zip Code 72205 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 391.03

C.	Full Name (Last, First, Middle Initial) QualChoice	Transaction ID: SB21B.88816 Date of Disbursement 04 / 28 / 2010
	Mailing Address 10825 Financial Centre Parkway City Little Rock State AR Zip Code 72211 Purpose of Disbursement Employee Benefits - Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1737.51

SUBTOTAL of Disbursements This Page (optional) ▶

2711.49

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) QualChoice Mailing Address 10825 Financial Centre Parkway City Little Rock State AR Zip Code 72211 Purpose of Disbursement Employee Benefits - Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88895 Date of Disbursement 06 / 07 / 2010
	Amount of Each Disbursement this Period 949.78 Category/Type

B. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88833 Date of Disbursement 05 / 09 / 2010
	Amount of Each Disbursement this Period 750.00 Category/Type

C. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88885 Date of Disbursement 06 / 01 / 2010
	Amount of Each Disbursement this Period 750.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2449.78
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)

PAGE 141 / 168

<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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Safe Foods</p> <p>Mailing Address 4801 North Shore Drive</p> <p>City North Little Rock State AR Zip Code 72118</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.98664</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>750.00</td> </tr> </table> </p> <p>Category/Type <table border="1"> <tr> <td></td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	3	0	/	2	0	1	0	750.00	
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	3	0	/	2	0	1	0														
750.00																							
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Twin City Printing</p> <p>Mailing Address P.O. Box 15368</p> <p>City North Little Rock State AR Zip Code 72231</p> <p>Purpose of Disbursement Printing Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88832</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>454.80</td> </tr> </table> </p> <p>Category/Type <table border="1"> <tr> <td></td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	9	/	2	0	1	0	454.80	
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	9	/	2	0	1	0														
454.80																							
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Twin City Printing</p> <p>Mailing Address P.O. Box 15368</p> <p>City North Little Rock State AR Zip Code 72231</p> <p>Purpose of Disbursement Printing Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88879</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>285.80</td> </tr> </table> </p> <p>Category/Type <table border="1"> <tr> <td></td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	0	1	/	2	0	1	0	285.80	
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	0	1	/	2	0	1	0														
285.80																							

SUBTOTAL of Disbursements This Page (optional) ▶

1490.60

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Twin City Printing	Transaction ID: SB21B.88893
	Mailing Address P.O. Box 15368	Date of Disbursement 06 / 07 / 2010
	City North Little Rock State AR Zip Code 72231	Amount of Each Disbursement this Period 820.70
	Purpose of Disbursement Printing Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Twin City Printing	Transaction ID: SB21B.88913
	Mailing Address P.O. Box 15368	Date of Disbursement 06 / 14 / 2010
	City North Little Rock State AR Zip Code 72231	Amount of Each Disbursement this Period 299.89
	Purpose of Disbursement Printing Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Twin City Printing	Transaction ID: SB21B.98667
	Mailing Address P.O. Box 15368	Date of Disbursement 06 / 30 / 2010
	City North Little Rock State AR Zip Code 72231	Amount of Each Disbursement this Period 1044.93
	Purpose of Disbursement Printing Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2165.52
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)

PAGE 143 / 168

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.88824 Date of Disbursement 04 / 29 / 2010
	Mailing Address P.O. Box 8999	Amount of Each Disbursement this Period 716.81
	City San Francisco State CA Zip Code 94128	
	Purpose of Disbursement Credit Card Pmt. - See Memos	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.88824.0 Date of Disbursement 04 / 29 / 2010
	Mailing Address P.O. Box 36647 - 1CR	Amount of Each Disbursement this Period 10.00
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.88824.3 Date of Disbursement 04 / 29 / 2010
	Mailing Address P.O. Box 619612 MD 2400	Amount of Each Disbursement this Period 633.80
	City DFW Airport State TX Zip Code 75261	
	Purpose of Disbursement Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	716.81
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)

PAGE 144 / 168

<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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Visa

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement Credit Card Pmt - See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.88826
Date of Disbursement: 04 / 29 / 2010

Amount of Each Disbursement this Period: 3115.99

Category/Type

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

Mailing Address 500 Staples Drive

City Farmington State MA Zip Code 01702

Purpose of Disbursement Office Supplies Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.88826.0
Date of Disbursement: 04 / 29 / 2010

Amount of Each Disbursement this Period: 140.54

Category/Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address P.O. Box 650661

City Dallas State TX Zip Code 75265

Purpose of Disbursement Telephone Service

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.88826.2
Date of Disbursement: 04 / 29 / 2010

Amount of Each Disbursement this Period: 247.23

Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 3115.99

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)

PAGE 145 / 168

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Dish Network	Transaction ID: SB21B.88826.3 Date of Disbursement
	Mailing Address Department 0063	<input type="text" value="04"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Expense	<input type="text" value="59.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Apple Online Store	Transaction ID: SB21B.88826.7 Date of Disbursement
	Mailing Address 1 Infinite Loop	<input type="text" value="04"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Cupertino State CA Zip Code 95014	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer	<input type="text" value="2138.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.88864 Date of Disbursement
	Mailing Address P.O. Box 8999	<input type="text" value="05"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Pmt - See Memos	<input type="text" value="1865.61"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

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)

PAGE 146 / 168

<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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 501 Commerce Drive

City State Zip Code
Maumelle AR 72113

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.88864.2

Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

352.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Dish Network

Mailing Address Department 0063

City State Zip Code
Palatine IL 60055

Purpose of Disbursement

Office Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.88864.6

Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

99.24

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples Direct

Mailing Address 500 Staples Drive

City State Zip Code
Farmington MA 01702

Purpose of Disbursement

Office Supplies Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.88864.7

Date of Disbursement

05 / 24 / 2010

Amount of Each Disbursement this Period

197.07

[MEMO ITEM]

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)

PAGE 147 / 168

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Family Research Council Action <hr/> Mailing Address 801 G STREET NW <hr/> City WASHINGTON State DC Zip Code 20001 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88864.8 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Visa <hr/> Mailing Address P.O. Box 8999 <hr/> City San Francisco State CA Zip Code 94128 <hr/> Purpose of Disbursement Credit Card Pmt - See Memos Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88939 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1229.03 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 600 East Capital Avenue <hr/> City Little Rock State AR Zip Code 72202 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.88939.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 384.51 <hr/> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1229.03

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)

PAGE 148 / 168

<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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 501 Commerce Drive</p> <p>City Maumelle State AR Zip Code 72113</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88939.1</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">46.24</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0	46.24
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	1	0													
46.24																						
<p>B. Full Name (Last, First, Middle Initial) Dish Network</p> <p>Mailing Address Department 0063</p> <p>City Palatine State IL Zip Code 60055</p> <p>Purpose of Disbursement Office Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88939.4</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">99.24</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0	99.24
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	1	0													
99.24																						
<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 12309 Chenal Parkway</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Office Supplies Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.88939.5</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">133.06</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0	133.06
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	1	0													
133.06																						

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)

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<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SB21B.88939.6 Date of Disbursement 06 / 24 / 2010
	Mailing Address 2903 Sprankle Avenue	Amount of Each Disbursement this Period 67.76
	City Memphis State TN Zip Code 38118	
	Purpose of Disbursement Postage	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.88939.8 Date of Disbursement 06 / 07 / 2010
	Mailing Address 501 Commerce Drive	Amount of Each Disbursement this Period 223.52
	City Maumelle State AR Zip Code 72113	
	Purpose of Disbursement Postage for Stutzman Campaign mail	[MEMO ITEM]
	Candidate Name STUTZMAN FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.88939.9 Date of Disbursement 06 / 07 / 2010
	Mailing Address 12309 Chenal Parkway	Amount of Each Disbursement this Period 243.79
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Supplies for Stutzman mailer	[MEMO ITEM]
	Candidate Name STUTZMAN FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	192161.93

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
BETH ANNE RANKIN FOR CONGRESS

Mailing Address P O Box 2160

City Magnolia State AR Zip Code 71754

Purpose of Disbursement Campaign Contribution

Candidate Name BETH ANNE RANKIN

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: AR District: 04

Transaction ID: SB23.98549
Date of Disbursement: 06 / 29 / 2010

Amount of Each Disbursement this Period: 1000.00

Category/Type

B. Full Name (Last, First, Middle Initial)
BILL FLORES FOR CONGRESS

Mailing Address PO BOX 6207

City BRYAN State TX Zip Code 77805

Purpose of Disbursement Campaign Contribution

Candidate Name WILLIAM FLORES

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.98709
Date of Disbursement: 06 / 17 / 2010

Amount of Each Disbursement this Period: 1000.00

Category/Type

C. Full Name (Last, First, Middle Initial)
BILL FLORES FOR CONGRESS

Mailing Address PO BOX 6207

City BRYAN State TX Zip Code 77805

Purpose of Disbursement Campaign Contribution

Candidate Name WILLIAM FLORES

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.98659
Date of Disbursement: 06 / 29 / 2010

Amount of Each Disbursement this Period: 1000.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ► 3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) BOOZMAN FOR ARKANSAS	Transaction ID: SB23.98599 Date of Disbursement 06 / 02 / 2010	
	Mailing Address 322 NORTH BLOOMINGTON SUITE A-B		
	City LOWELL State AR Zip Code 72745	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name JOHN BOOZMAN	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: AR District: 00		
B.	Full Name (Last, First, Middle Initial) CARROLL CAMPBELL FOR CONGRESS	Transaction ID: SB23.98662 Date of Disbursement 06 / 29 / 2010	
	Mailing Address PO BOX 20125		
	City CHARLESTON State SC Zip Code 29413	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name CARROLL A III CAMPBELL	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: SC District: 01		
C.	Full Name (Last, First, Middle Initial) CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE	Transaction ID: SB23.98654 Date of Disbursement 06 / 29 / 2010	
	Mailing Address P.O. Box 11091 SUITE 1000 JAMES BUILDING		
	City Chattanooga State TN Zip Code 37401	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name CHARLES J FLEISCHMANN	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TN District: 03		

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)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) CRAWFORD FOR CONGRESS	Transaction ID: SB23.98546 Date of Disbursement 06 / 25 / 2010
	Mailing Address PO BOX 16956	Amount of Each Disbursement this Period 3000.00
	City JONESBORO State AR Zip Code 72403	
	Purpose of Disbursement Campaign Contribution	Category/Type
	Candidate Name ERIC ALAN RICK CRAWFORD	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DANIEL WEBSTER FOR CONGRESS	Transaction ID: SB23.98580 Date of Disbursement 06 / 29 / 2010
	Mailing Address 3400 OLD WINTER GARDEN ROAD	Amount of Each Disbursement this Period 2500.00
	City ORLANDO State FL Zip Code 32805	
	Purpose of Disbursement Campaign Contribution	Category/Type
	Candidate Name DANIEL WEBSTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVID RIVERA FOR U.S. CONGRESS	Transaction ID: SB23.98577 Date of Disbursement 06 / 29 / 2010
	Mailing Address PO BOX 520633	Amount of Each Disbursement this Period 1000.00
	City MIAMI State FL Zip Code 33152	
	Purpose of Disbursement Campaign Contribution	Category/Type
	Candidate Name DAVID RIVERA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) DEVORE FOR CALIFORNIA	Transaction ID: SB23.104757
	Mailing Address 30151 TOMAS	Date of Disbursement MM / DD / YYYY 05 / 13 / 2010
	City RANCHO SANTA MARGA State CA Zip Code 92688	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name CHUCK DEVORE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CA District: 00	

B.	Full Name (Last, First, Middle Initial) FAMILIES FOR JAMES LANKFORD	Transaction ID: SB23.98622
	Mailing Address 16121 WINDRUSH PL	Date of Disbursement MM / DD / YYYY 06 / 29 / 2010
	City EDMOND State OK Zip Code 73013	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name JAMES LANKFORD	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: OK District: 05	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF DAVID HARMER	Transaction ID: SB23.98572
	Mailing Address 9321 SILVERBEND LANE	Date of Disbursement MM / DD / YYYY 06 / 29 / 2010
	City ELK GROVE State CA Zip Code 95624	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name DAVID JEFFREY HARMER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CA District: 10	

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS ROSS <hr/> Mailing Address PO BOX 7310 <hr/> City LAKELAND State FL Zip Code 33807 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name DENNIS ALAN ROSS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98583 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div>
B.	Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE INC <hr/> Mailing Address PO BOX 1000 <hr/> City DES MOINES State IA Zip Code 50304 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name CHARLES E SENATOR GRASSLEY <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98605 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div>
C.	Full Name (Last, First, Middle Initial) JEFF DUNCAN FOR CONGRESS <hr/> Mailing Address PO BOX 732 <hr/> City CLINTON State SC Zip Code 29325 <hr/> Purpose of Disbursement Campaign Contribution Candidate Name JEFF DUNCAN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98651 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
JOE WILSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2145

City WEST COLUMBIA State SC Zip Code 29171

Purpose of Disbursement
Campaign Contribution

Candidate Name
JOE THE HON. WILSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 02

Transaction ID: SB23.98637
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
KAREN DIEBEL FOR CONGRESS

Mailing Address 133 S HARBOR DRIVE
#482

City VENICE State FL Zip Code 34285

Purpose of Disbursement
Campaign Contribution

Candidate Name
KAREN DIEBEL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 24

Transaction ID: SB23.98586
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MULVANEY FOR CONGRESS

Mailing Address 9789 CHARLOTTE HWY SUITE 400-255

City INDIAN LAND State SC Zip Code 29707

Purpose of Disbursement
Campaign Contribution

Candidate Name
JOHN MICHAEL 'MICK' MULVANEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.98648
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) NICK POPADITCH FOR CONGRESS	Transaction ID: SB23.98563 Date of Disbursement 06 / 29 / 2010	
	Mailing Address 937 CAMINO LA PAZ		
	City CHULA VISTA State CA Zip Code 91910	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name NICHOLAS ALLEN POPADITCH	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: CA District: 51	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) NUNNELEE FOR CONGRESS	Transaction ID: SB23.98610 Date of Disbursement 06 / 29 / 2010	
	Mailing Address 438 EAST MAIN ST PO BOX 7092		
	City TUPELO State MS Zip Code 38802	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name PATRICK ALAN NUNNELEE	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: MS District: 01	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) PAT MEEHAN FOR CONGRESS	Transaction ID: SB23.98624 Date of Disbursement 06 / 29 / 2010	
	Mailing Address 5035 TOWNSHIP LINE ROAD PO BOX 308		
	City DREXEL HILL State PA Zip Code 19026	Amount of Each Disbursement this Period	3000.00
	Purpose of Disbursement Campaign Contribution		
	Candidate Name PATRICK L MEEHAN	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: PA District: 07	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) PORTMAN FOR SENATE COMMITTEE	Transaction ID: SB23.98613 Date of Disbursement <input type="text" value="06"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	Mailing Address 8331 LITTLE HARBOR DRIVE	Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
	City CINCINNATI State OH Zip Code 45244	
	Purpose of Disbursement Campaign Contribution	<input type="text"/>
	Candidate Name ROB PORTMAN	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 00	

B.	Full Name (Last, First, Middle Initial) SCOTT WALLACE FOR US CONGRESS	Transaction ID: SB23.88944 Date of Disbursement <input type="text" value="04"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	Mailing Address PO Box 242600	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	City Little Rock State AR Zip Code 72223	
	Purpose of Disbursement Campaign Contribution	<input type="text"/>
	Candidate Name SCOTT WALLACE	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AR District: 02	

C.	Full Name (Last, First, Middle Initial) STAR PARKER FOR CONGRESS 2010	Transaction ID: SB23.98567 Date of Disbursement <input type="text" value="06"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	Mailing Address PO BOX 4625	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	City CARSON State CA Zip Code 90749	
	Purpose of Disbursement Campaign Contribution	<input type="text"/>
	Candidate Name STAR PARKER	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CA District: 37	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS	Transaction ID: SB23.98618 Date of Disbursement
	Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45211	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="1000.00"/>
	Candidate Name STEVE CHABOT	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STUTZMAN FOR CONGRESS	Transaction ID: SB23.98712 Date of Disbursement
	Mailing Address 0250 W 600 N	<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City HOWE State IN Zip Code 46746	Amount of Each Disbursement this Period
	Purpose of Disbursement In Kind Contribution - Fundraising Mail-Out	<input type="text" value="467.31"/>
	Candidate Name MARLIN A STUTZMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) STUTZMAN FOR CONGRESS	Transaction ID: SB23.98608 Date of Disbursement
	Mailing Address 0250 W 600 N	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City HOWE State IN Zip Code 46746	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="1000.00"/>
	Candidate Name MARLIN A STUTZMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE Mailing Address P.O. Box 7526 City Little Rock State AR Zip Code 72217 Purpose of Disbursement Campaign Contribution Candidate Name JOHN TIMOTHY GRIFFIN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98559 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

B. Full Name (Last, First, Middle Initial) TIM SCOTT FOR CONGRESS Mailing Address 1405 ASHLEY RIVER ROAD City CHARLESTON State SC Zip Code 29407 Purpose of Disbursement Campaign Contribution Candidate Name TIMOTHY E SCOTT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98628 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00

C. Full Name (Last, First, Middle Initial) TOM GANLEY FOR CONGRESS Mailing Address PO BOX 41331 City BRECKSVILLE State OH Zip Code 44141 Purpose of Disbursement Campaign Contribution Candidate Name THOMAS D GANLEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.98616 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) TREY GOWDY FOR CONGRESS</p> <p>Mailing Address PO BOX 3324</p> <p>City SPARTANBURG State SC Zip Code 29304</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name TREY GOWDY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 04</p>	<p>Transaction ID: SB23.98645</p> <p>Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VAN TRAN FOR CONGRESS</p> <p>Mailing Address 2150 RIVER PLAZA DR #150</p> <p>City SACRAMENTO State CA Zip Code 95833</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name VAN TRAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 47</p>	<p>Transaction ID: SB23.98573</p> <p>Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) WALORSKI FOR CONGRESS INC</p> <p>Mailing Address PO Box 954</p> <p>City Mishawaka State IN Zip Code 46546</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name JACKIE WALORSKI (SWIHART)</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 02</p>	<p>Transaction ID: SB23.98590</p> <p>Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	53000.00

**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)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) 'Trucker Randy' Bishop for State Senate	Transaction ID: SB29.98672
	Mailing Address 8666 E. Traverse Highway	Date of Disbursement 06 / 30 / 2010
	City Traverse City State MI Zip Code 49685	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name 'Trucker' Randy Bishop	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alan Wilson for Attorney General	Transaction ID: SB29.98634
	Mailing Address P.O. Box 1453	Date of Disbursement 06 / 29 / 2010
	City Columbia State SC Zip Code 29202	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name Alan Wilson	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ballentine for House	Transaction ID: SB29.98678
	Mailing Address 1108 Belfair Way	Date of Disbursement 06 / 29 / 2010
	City Irmo State SC Zip Code 29063	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Campaign Contribution	Category/ Type
	Candidate Name Nathan Ballentine	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Bill Brady for Governor</p> <p>Mailing Address 1201 N. Clark Suite 300</p> <p>City Chicago State IL Zip Code 60610</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Bill Brady</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.98674</p> <p>Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Brian Birdwell for Texas State Senate</p> <p>Mailing Address P.O. Box 1111</p> <p>City Granbury State TX Zip Code 76048</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Brian Birdwell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.89017</p> <p>Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) David Dewhurst for Lieutenant Governor</p> <p>Mailing Address P.O. Box 756</p> <p>City Austin State TX Zip Code 78767</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name David Dewhurst</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.89020</p> <p>Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Erwin Cain for State Representative	Transaction ID: SB29.89026 Date of Disbursement
	Mailing Address P.O. Box 791	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Sulphur Springs State TX Zip Code 75483	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Erwin Cain	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Sam Teasley	Transaction ID: SB29.98589 Date of Disbursement
	Mailing Address P.O. Box 670051	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Marietta State GA Zip Code 30066	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Sam Teasley	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hickerson State Representative Campaign Committee	Transaction ID: SB29.98548 Date of Disbursement
	Mailing Address P.O. Box 3126	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Texarkana State AR Zip Code 75504-3126	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Mary 'Prissy' Hickerson	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: AR District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Jim Keet for Governor</p> <p>Mailing Address P.O. Box 25436</p> <p>City Little Rock State AR Zip Code 72221</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Jim Keet</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.98557</p> <p>Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ken Paxton Campaign</p> <p>Mailing Address 5613 S. Woodcreek Circle</p> <p>City McKinney State TX Zip Code 76071</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Ken Paxton</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.89011</p> <p>Date of Disbursement 06 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Loftis for Treasurer</p> <p>Mailing Address 701 Gervais Street Suite 150-135</p> <p>City Columbia State SC Zip Code 29201</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name Curtis Loftis</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.98642</p> <p>Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Mark Darr for Lieutenant Governor	Transaction ID: SB29.89029 Date of Disbursement
	Mailing Address 2605 W. Pleasant Grove Road Ste. 202-50	<input type="text" value="05"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Rogers State AR Zip Code 72758	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="2000.00"/>
	Candidate Name Mark Darr	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Shepard for Arkansas Representative	Transaction ID: SB29.98547 Date of Disbursement
	Mailing Address P.O. Box 12004	<input type="text" value="06"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City El Dorado State AR Zip Code 71730	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Matthew Shepard	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Phil King Campaign	Transaction ID: SB29.98711 Date of Disbursement
	Mailing Address P.O. Box 1913	<input type="text" value="06"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Weatherford State TX Zip Code 76086	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Phil King	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Rick Quinn for House	Transaction ID: SB29.98631 Date of Disbursement
	Mailing Address 610 Spruce Glen Court	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Lexington State SC Zip Code 29072	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Rick Quinn	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Team Vander Plaats	Transaction ID: SB29.88947 Date of Disbursement
	Mailing Address P.O. Box 2010	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Sioux City State IA Zip Code 51104	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="2500.00"/>
	Candidate Name Bob Vander Plaats	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Todd Alan Smith Campaign	Transaction ID: SB29.89014 Date of Disbursement
	Mailing Address 1608 Airport Freeway	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Bedford State TX Zip Code 76022	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Todd Alan Smith	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 92	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Wes Enos for Iowa Senate	Transaction ID: SB29.98698 Date of Disbursement
	Mailing Address 409 5th Street NW	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Bondurant State IA Zip Code 50035	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Contribution	<input type="text" value="500.00"/>
	Candidate Name Wes Enos	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	State: IA District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="17000.00"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 168 / 168
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.	Nature of Debt (Purpose): Web Development/Hosting
Mailing Address 1411 N. Westshore Boulevard Suite 204	
City Tampa State FL ZIP Code 33607	

Outstanding Balance Beginning This Period 7018.50	Transaction ID: SD10.42477	
Amount Incurred This Period 8930.21	Payment This Period 15948.71	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor JPMS Cox	Nature of Debt (Purpose): Accounting & Compliance Fees
Mailing Address 11300 Cantrell Road Suite 301	
City Little Rock State AR ZIP Code 72212	

Outstanding Balance Beginning This Period 6000.00	Transaction ID: SD10.67304	
Amount Incurred This Period 12000.00	Payment This Period 18000.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0.00