

**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

ADVANCED MICRO DEVICES, INC. PAC

ADDRESS (number and street) 2350 KERNER BLVD., SUITE 250

Check if different than previously reported. (ACC)

SAN RAFAEL CA 94901

2. **FEC IDENTIFICATION NUMBER** C00404483

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12G)

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 07 01 2009 through 12 31 2009

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

Type or Print Name of Treasurer Steven S. Lucas

Signature of Treasurer Electronically Filed by Steven S. Lucas Date 01 14 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 | | | | | | | | | | | | FEC FORM 3X (Rev. 12/2004) |
|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--------------------------------------|

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
ADVANCED MICRO DEVICES, INC. PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | 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>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 13600.00 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 7800.00 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 10663.17 | 10663.17 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 18463.17 | 24263.17 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 8088.17 | 13888.17 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 10375.00 | 10375.00 | | | | | | | | |
| 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

Write or Type Committee Name

ADVANCED MICRO DEVICES, INC. PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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) | 10375.00 | 10375.00 |
| (ii) Unitemized | 200.00 | 200.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 10575.00 | 10575.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 10575.00 | 10575.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 88.17 | 88.17 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total 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)) | 10663.17 | 10663.17 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 10663.17 | 10663.17 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 8000.00 | 13800.00 |
| 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 | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 88.17 | 88.17 |
| 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)).. | 8088.17 | 13888.17 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 8088.17 | 13888.17 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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) | 10575.00 | 10575.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 10575.00 | 10575.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 88.17 | 88.17 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | -88.17 | -88.17 |

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

| | | |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 12 |
| | <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)
ADVANCED MICRO DEVICES, INC. PAC

| | | | |
|---|---|--|--|
| A. | Full Name (Last, First, Middle Initial) STEVEN J. KESTER | | Date of Receipt |
| | Mailing Address 6903 GLEN RIDGE DR. | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2009 |
| | City | State | Zip Code |
| | AUSTIN | TX | 78731 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: INC.A.85 |
| Name of Employer ADVANCED MICRO DEVICES, INC. | | Occupation SENIOR MANAGER, GOVERNMENT AFFAIRS | 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"/> 500.00 |

| | | | |
|---|---|--|--|
| B. | Full Name (Last, First, Middle Initial) SUSAN MOORE | | Date of Receipt |
| | Mailing Address 809 NEWMAN DR. | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2009 |
| | City | State | Zip Code |
| | AUSTIN | TX | 78703 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: INC.A.90 |
| Name of Employer ADVANCED MICRO DEVICES, INC. | | Occupation DIRECTOR, GOVERNMENT AFFAIRS | 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"/> 250.00 |

| | | | |
|---|---|-----------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) ALLYSON PEERMAN | | Date of Receipt |
| | Mailing Address 5204 E. BEN WHITE BLVD., MS 500 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2009 |
| | City | State | Zip Code |
| | AUSTIN | TX | 78741 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: INC.A.89 |
| Name of Employer ADVANCED MICRO DEVICES, INC. | | Occupation VP - PUBLIC AFFAIRS | 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"/> 250.00 |

| | |
|--|---------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 1000.00 |
| 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: (check only one) | PAGE 7 / 12 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
ADVANCED MICRO DEVICES, INC. PAC

| | | | | | |
|---|---|---------------------------------------|---|---|--|
| A. | Full Name (Last, First, Middle Initial) DERRICK R. MEYER | | Date of Receipt MM / DD / YYYY 09 / 21 / 2009 | | |
| | Mailing Address 3407 BARTON POINT DRIVE | | Transaction ID: INC.A.94 | | |
| | City AUSTIN | State TX | Zip Code 78733 | Amount of Each Receipt this Period 1250.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. | Occupation CHIEF EXECUTIVE OFFICER | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1250.00 | | | |

| | | | | | |
|---|---|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) JEFFREY M. VERHEUL | | Date of Receipt MM / DD / YYYY 09 / 21 / 2009 | | |
| | Mailing Address 314 BARBUDA DRIVE | | Transaction ID: INC.A.95 | | |
| | City LAKEWAY | State TX | Zip Code 78734 | Amount of Each Receipt this Period 2500.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. | Occupation CVP - PROCESSOR SOLUTIONS ENGINEERING | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 2500.00 | | | |

| | | | | | |
|---|---|---|---|---|--|
| C. | Full Name (Last, First, Middle Initial) P. KATHLEEN WELLS | | Date of Receipt MM / DD / YYYY 09 / 28 / 2009 | | |
| | Mailing Address 8125 COBBLESTONE | | Transaction ID: INC.A.100 | | |
| | City AUSTIN | State TX | Zip Code 78735-7902 | Amount of Each Receipt this Period 2500.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. | Occupation V.P. AND DEPUTY GENERAL COUNSEL | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 2500.00 | | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6250.00 |
| 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 / 12 |
| | <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)
ADVANCED MICRO DEVICES, INC. PAC

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) MARTIN SEYER | Date of Receipt MM / DD / YYYY 09 / 30 / 2009 |
| | Mailing Address 7171 SOUTHWEST PARKWAY, B100.T.301 | Transaction ID: INC.A.101 |
| | City State Zip Code AUSTIN TX 78735 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) AHMED MAHMOUD | Date of Receipt MM / DD / YYYY 10 / 06 / 2009 |
| | Mailing Address 4312 RAVINE RIDGE TRAIL | Transaction ID: INC.A.102 |
| | City State Zip Code AUSTIN TX 78746 | Amount of Each Receipt this Period 625.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. Occupation SVP AND CHIEF INFORMATION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) HARRY WOLIN | Date of Receipt MM / DD / YYYY 11 / 23 / 2009 |
| | Mailing Address 11216 NATIVE TEXAN TRAIL | Transaction ID: INC.A.105 |
| | City State Zip Code AUSTIN TX 78735 | Amount of Each Receipt this Period 1500.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer ADVANCED MICRO DEVICES, INC. Occupation SENIOR VICE PRESIDENT & GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 3125.00 |
| TOTAL This Period (last page this line number only) | 10375.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ADVANCED MICRO DEVICES, INC. PAC

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS | Transaction ID: EXP.B.83 Date of Disbursement |
| | Mailing Address 555 CAPITOL MALL, SUITE 1425 | <input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/> |
| | City SACRAMENTO State CA Zip Code 95814 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="1000.00"/> |
| | Candidate Name ANNA ESHOO | <input type="text" value="011"/> Category/Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) ALAMO PAC | Transaction ID: EXP.B.86 Date of Disbursement |
| | Mailing Address 919 CONGRESS AVE STE 1400 FROST BANK PLAZA | <input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/> |
| | City AUSTIN State TX Zip Code 78701 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="2000.00"/> |
| | Candidate Name LEADERSHIP PAC | <input type="text" value="011"/> 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) LEAHY FOR US SENATOR COMMITTEE | Transaction ID: EXP.B.91 Date of Disbursement |
| | Mailing Address PO BOX 1042 | <input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/> |
| | City MONTPELIER State VT Zip Code 05601 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | <input type="text" value="1000.00"/> |
| | Candidate Name PATRICK LEAHY | <input type="text" value="011"/> Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="4000.00"/> |
| 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)
ADVANCED MICRO DEVICES, INC. PAC

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) SCOTT MURPHY FOR CONGRESS <hr/> Mailing Address 615 GLEN STREET <hr/> City GLENS FALLS State NY Zip Code 12801 <hr/> Purpose of Disbursement <hr/> Candidate Name SCOTT MURPHY FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: EXP.B.92 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2009 |
| | Amount of Each Disbursement this Period 1000.00 |
| | 011 Category/ Type |
| | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE <hr/> Mailing Address 313 C ST NE <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name KIRSTEN E. GILLIBRAND <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: EXP.B.98 Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2009 |
| | Amount of Each Disbursement this Period 900.00 |
| | 011 Category/ Type |
| | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE <hr/> Mailing Address 313 C ST NE <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name KIRSTEN E. GILLIBRAND <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: EXP.B.99 Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2009 |
| | Amount of Each Disbursement this Period 100.00 |
| | 011 Category/ Type |
| | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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) ▶ | (Empty box) |

B. Form/Schedule : **SB23**



Transaction ID : **EXP.B.98**

**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 12 / 12

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
ADVANCED MICRO DEVICES, INC. PAC

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC. | Transaction ID: EXP.B.104 |
| | Mailing Address 175 S.W. TEMPLE, STE. 650 | Date of Disbursement 11 / 20 / 2009 |
| | City SALT LAKE CITY State UT Zip Code 84101 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | 011 Category/ Type |
| | Candidate Name ORRIN G. HATCH | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: UT District: | |
| B. | Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC. | Transaction ID: EXP.B.106 |
| | Mailing Address 175 S.W. TEMPLE, STE. 650 | Date of Disbursement 12 / 02 / 2009 |
| | City SALT LAKE CITY State UT Zip Code 84101 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | 011 Category/ Type |
| | Candidate Name ORRIN G. HATCH | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: UT District: | |

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

8000.00