

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

HUCK PAC

ADDRESS (number and street)

PO BOX 2008

☐ Check if different  
than previously  
reported. (ACC)

LITTLE ROCK

AR

72203

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 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  
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Bryan Jeffrey

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HUCK PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2011

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2011</td></tr></table>	Y	Y	Y	Y	Y	2011						<table><tr><td colspan="5">137660.40</td></tr></table>	137660.40				
Y	Y	Y	Y	Y													
2011																	
137660.40																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">137660.40</td></tr></table>	137660.40															
137660.40																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">317544.33</td></tr></table>	317544.33					<table><tr><td colspan="5">317544.33</td></tr></table>	317544.33									
317544.33																	
317544.33																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">455204.73</td></tr></table>	455204.73					<table><tr><td colspan="5">455204.73</td></tr></table>	455204.73									
455204.73																	
455204.73																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">292734.00</td></tr></table>	292734.00					<table><tr><td colspan="5">292734.00</td></tr></table>	292734.00									
292734.00																	
292734.00																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">162470.73</td></tr></table>	162470.73					<table><tr><td colspan="5">162470.73</td></tr></table>	162470.73									
162470.73																	
162470.73																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">5353.75</td></tr></table>	5353.75															
5353.75																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**HUCK PAC**

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 01 / 01 / 2011

To:

 M M / D D / Y Y Y Y Y  
 06 / 30 / 2011
**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).....**

128508.92

128508.92

**(ii) Unitemized .....**

181035.41

181035.41

**(iii) TOTAL (add**

Lines 11(a)(i) and (ii)..... ▶

309544.33

309544.33

**(b) Political Party Committees .....**

0.00

0.00

**(c) Other Political Committees**

(such as PACs).....

8000.00

8000.00

**(d) Total Contributions (add Lines**

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

317544.33

317544.33

**12. Transfers From Affiliated/Other**

Party Committees.....

0.00

0.00

**13. All Loans Received .....**

0.00

0.00

**14. Loan Repayments Received.....**

0.00

0.00

**15. Offsets To Operating Expenditures**

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

**16. Refunds of Contributions Made**

to Federal Candidates and Other

Political Committees.....

0.00

0.00

**17. Other Federal Receipts**

(Dividends, Interest, etc.).....

0.00

0.00

**18. Transfers from Non-Federal and Levin Funds****(a) Non-Federal Account**

(from Schedule H3).....

0.00

0.00

**(b) Levin Funds (from Schedule H5) .....**

0.00

0.00

**(c) Total Transfers (add 18(a) and 18(b))..**

0.00

0.00

**19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶**

317544.33

317544.33

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19) .....

317544.33

317544.33

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	292499.00	292499.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	292499.00	292499.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	235.00	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)).....	235.00	235.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	292734.00	292734.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	292734.00	292734.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	317544.33	317544.33
34. Total Contribution Refunds (from Line 28(d)) .....	235.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	317309.33	317309.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	292499.00	292499.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	292499.00	292499.00

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

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

FOR LINE NUMBER: PAGE 6 OF 239

(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**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2011

Transaction ID : SA11AI.27386

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2011

Transaction ID : SA11AI.27387

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2011

Transaction ID : SA11AI.27388

Amount of Each Receipt this Period

5.00

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

30.12

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 239

(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

220.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 25 2011

Transaction ID : SA11AI.27389

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

225.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 25 2011

Transaction ID : SA11AI.27390

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

230.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 25 2011

Transaction ID : SA11AI.27391

Amount of Each Receipt this Period

5.00

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

15.00

**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 8 OF 239

(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2011

Transaction ID : SA11AI.27392

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2011

Transaction ID : SA11AI.27393

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

261.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2011

Transaction ID : SA11AI.30154

Amount of Each Receipt this Period

20.12

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

30.12

**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:  
(check only one)

PAGE 9 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

281.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2011

**Transaction ID : SA11AI.30155**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. 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 ▼

286.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2011

**Transaction ID : SA11AI.30156**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

291.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2011

**Transaction ID : SA11AI.30157**

Amount of Each Receipt this Period

5.00

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

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

30.12

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

296.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2011

**Transaction ID : SA11AI.30158**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

301.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2011

**Transaction ID : SA11AI.30159**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

306.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2011

**Transaction ID : SA11AI.30160**

Amount of Each Receipt this Period

5.00

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

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

15.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 239

(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

311.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 10 2011

Transaction ID : SA11AI.30161

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

316.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 10 2011

Transaction ID : SA11AI.30162

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

321.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 10 2011

Transaction ID : SA11AI.30163

Amount of Each Receipt this Period

5.00

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

15.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

326.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 12 2011

Transaction ID : SA11AI.30164

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

331.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 12 2011

Transaction ID : SA11AI.30165

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

336.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 12 2011

Transaction ID : SA11AI.30166

Amount of Each Receipt this Period

5.00

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

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

15.00

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

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FOR LINE NUMBER:  
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**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

341.20

Date of Receipt

03 / 12 / 2011

Transaction ID : SA11AI.30167

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

346.20

Date of Receipt

03 / 14 / 2011

Transaction ID : SA11AI.30168

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

351.20

Date of Receipt

03 / 15 / 2011

Transaction ID : SA11AI.30169

Amount of Each Receipt this Period

5.00

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

15.00

**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 14 OF 239

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

356.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2011

Transaction ID : SA11AI.30170

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

361.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2011

Transaction ID : SA11AI.30171

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

366.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2011

Transaction ID : SA11AI.30172

Amount of Each Receipt this Period

5.00

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

15.00

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

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

Use separate schedule(s)  
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**A. Shelley Ahlersmeyer**

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 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 ▼

371.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 18 2011

Transaction ID : SA11AI.30173

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

376.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 18 2011

Transaction ID : SA11AI.30174

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

381.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 20 2011

Transaction ID : SA11AI.30175

Amount of Each Receipt this Period

5.00

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

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

15.00

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

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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 ▼

386.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2011

**Transaction ID : SA11AI.30176**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

391.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2011

**Transaction ID : SA11AI.30177**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

396.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2011

**Transaction ID : SA11AI.30178**

Amount of Each Receipt this Period

5.00

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

15.00

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



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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 ▼

401.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2011

**Transaction ID : SA11AI.30179**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

406.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2011

**Transaction ID : SA11AI.30180**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

411.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID : SA11AI.30181**

Amount of Each Receipt this Period

5.00

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

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

15.00

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

416.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30182

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

421.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30183

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

426.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30184

Amount of Each Receipt this Period

5.00

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

15.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

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**A. 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 ▼

431.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30185

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

436.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30186

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

441.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 24 2011

Transaction ID : SA11AI.30187

Amount of Each Receipt this Period

5.00

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

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

15.00

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

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FOR LINE NUMBER:  
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PAGE 20 OF 239

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

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**A. Shelley Ahlersmeyer**

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State

IN

Zip Code

46580

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C

Name of Employer

Refior Law Office

Occupation

Paralegal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID : SA11AI.30188**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

451.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID : SA11AI.30189**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

456.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID : SA11AI.30190**

Amount of Each Receipt this Period

5.00

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

15.00

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

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

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Full Name (Last, First, Middle Initial)

**A. 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 ▼

461.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2011

**Transaction ID : SA11AI.30191**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

466.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2011

**Transaction ID : SA11AI.30192**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

471.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2011

**Transaction ID : SA11AI.30193**

Amount of Each Receipt this Period

5.00

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

15.00

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

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

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C

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Refior Law Office

Occupation

Paralegal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2011

**Transaction ID : SA11AI.30194**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. 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 ▼

511.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2011

**Transaction ID : SA11AI.30195**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. 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 ▼

531.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2011

**Transaction ID : SA11AI.35339**

Amount of Each Receipt this Period

20.12

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

60.36

**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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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

551.68

Date of Receipt

04 / 04 / 2011

Transaction ID : SA11AI.35340

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. 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 ▼

571.80

Date of Receipt

04 / 07 / 2011

Transaction ID : SA11AI.35341

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. 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 ▼

591.92

Date of Receipt

04 / 11 / 2011

Transaction ID : SA11AI.35345

Amount of Each Receipt this Period

20.12

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

60.36

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

602.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2011

Transaction ID : SA11AI.35347

Amount of Each Receipt this Period

10.40

Full Name (Last, First, Middle Initial)

**B. 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 ▼

622.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2011

Transaction ID : SA11AI.35348

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. 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 ▼

642.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2011

Transaction ID : SA11AI.35349

Amount of Each Receipt this Period

20.12

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

50.64

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



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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

1642.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2011

**Transaction ID : SA11AI.34025**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1692.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2011

**Transaction ID : SA11AI.34026**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

1717.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 16 / 2011

**Transaction ID : SA11AI.38320**

Amount of Each Receipt this Period

25.00

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

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

1075.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

1742.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 24 2011

Transaction ID : SA11AI.38398

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1762.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 28 2011

Transaction ID : SA11AI.39086

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. 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 ▼

1782.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2011

Transaction ID : SA11AI.39502

Amount of Each Receipt this Period

20.12

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

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

65.24

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1802.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

**Transaction ID : SA11AI.39752**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. Art Ally**

Mailing Address 624 Eden Park Avenue

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Timothy Partners, Ltd

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2011

**Transaction ID : SA11AI.29509**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Florence Attridge**

Mailing Address 2820 Habersham Rd., NW

City

Atlanta

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2011

**Transaction ID : SA11AI.29361**

Amount of Each Receipt this Period

250.00

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

1770.12

**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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PAGE 28 OF 239

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Nicholas Babiak**

Mailing Address 965 N. Harrison St.

City State Zip Code  
Arlington VA 22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Skylet, Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2011

**Transaction ID : SA11AI.33684**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. J. Alex Bell**

Mailing Address 328 Margie Dr.

City State Zip Code  
Warner Robins GA 31088

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Dental Associates

Occupation

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

**Transaction ID : SA11AI.39544**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2011

**Transaction ID : SA11AI.27052**

Amount of Each Receipt this Period

50.00

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

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

1150.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2011

Transaction ID : SA11AI.27053

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2011

Transaction ID : SA11AI.27054

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2011

Transaction ID : SA11AI.29581

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 28 2011

Transaction ID : SA11AI.29582

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 28 2011

Transaction ID : SA11AI.29583

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 21 2011

Transaction ID : SA11AI.34851

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2011

Transaction ID : SA11AI.34852

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2011

Transaction ID : SA11AI.34853

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2011

Transaction ID : SA11AI.33877

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2011

Transaction ID : SA11AI.33878

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2011

Transaction ID : SA11AI.33879

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City State Zip Code  
Tampa FL 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 ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2011

Transaction ID : SA11AI.38757

Amount of Each Receipt this Period

50.00

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

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

150.00



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

Use separate schedule(s)  
for each category of the  
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(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**

Full Name (Last, First, Middle Initial)

**A. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City	State	Zip Code
Tampa	FL	33611

FEC ID number of contributing federal political committee.

C

Name of Employer  
Moffitt Cancer CenterOccupation  
Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2011

Transaction ID : SA11AI.38917

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Patricia Bellairs**

Mailing Address 3005 Bay Vista Avenue

City	State	Zip Code
Tampa	FL	33611

FEC ID number of contributing federal political committee.

C

Name of Employer  
Moffitt Cancer CenterOccupation  
Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2011

Transaction ID : SA11AI.38918

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Geoff Besso**

Mailing Address 6803 Pinebrooke Drive

City	State	Zip Code
Hudson	OH	44236

FEC ID number of contributing federal political committee.

C

Name of Employer  
Besso ClinicOccupation  
Chiropractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2011

Transaction ID : SA11AI.35213

Amount of Each Receipt this Period

250.00

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

350.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Jesse Biter**

Mailing Address 1233 N. Gulfstream Ave.

City State Zip Code  
 Sarasota FL 34236

FEC ID number of contributing federal political committee.

C

Name of Employer

Biter Enterprises

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2011

Transaction ID : SA11AI.26088

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Katie Biter**

Mailing Address 1233 N. Gulfstream Ave.

City State Zip Code  
 Sarasota FL 34236

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2011

Transaction ID : SA11AI.26090

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Gordon Blocker**

Mailing Address 2802 Highcrest Drive

City State Zip Code  
 Grapevine TX 76051

FEC ID number of contributing federal political committee.

C

Name of Employer

D Marina Johnson, M.D. P.A.

Occupation

Practice Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2011

Transaction ID : SA11AI.31472

Amount of Each Receipt this Period

250.00

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

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

10250.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Julie Borden**

Mailing Address 4106 Armistice Dr.

City State Zip Code  
 Frisco TX 75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Marketing Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31274**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Peggy Bost**

Mailing Address 5107 Cerro Vista

City State Zip Code  
 San Antonio TX 78233

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 Y Y  
 03 / 28 / 2011

**Transaction ID : SA11AI.31676**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. Peggy Bost**

Mailing Address 5107 Cerro Vista

City State Zip Code  
 San Antonio TX 78233

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2011

**Transaction ID : SA11AI.31675**

Amount of Each Receipt this Period

5.00

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

455.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. 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 ▼

280.00

Date of Receipt

04 / 11 / 2011

Transaction ID : SA11AI.36622

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Guy Bowers**

Mailing Address P.O. Box 8090

City

Ruidoso

State

NM

Zip Code

88355

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 ▼

5000.00

Date of Receipt

01 / 28 / 2011

Transaction ID : SA11AI.26486

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Phil Brand**

Mailing Address 6066 Churchill Court

City

Ketchikan

State

AK

Zip Code

99901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Alaska

Occupation

Maritime Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 23 / 2011

Transaction ID : SA11AI.34714

Amount of Each Receipt this Period

50.00

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

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

5075.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Phil Brand**

Mailing Address 6066 Churchill Court

City  
Ketchikan

State Zip Code  
AK 99901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

State of Alaska

Maritime Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2011

**Transaction ID : SA11AI.38615**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. George Hugh Brandon**

Mailing Address 1326 Black Oak Drive

City  
Carrollton

State Zip Code  
TX 75007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MDB Capital

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2011

**Transaction ID : SA11AI.31260**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. David Brewer**

Mailing Address 14314 Stanley Lane

City  
Forney

State Zip Code  
TX 75126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Gateway Petroleum

Oil and Gas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2011

**Transaction ID : SA11AI.31344**

Amount of Each Receipt this Period

500.00

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

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

1050.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Pam Brewer**

Mailing Address 14314 Stanley Lane

City State Zip Code  
Forney TX 75126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Baptist Church Dallas

Occupation  
Women's Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2011

**Transaction ID : SA11AI.31342**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Floyd Brown**

Mailing Address 41620 N Shadow Creek Way

City State Zip Code  
Anthem AZ 85086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Excellentia Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2011

**Transaction ID : SA11AI.34509**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Mark Brown**

Mailing Address 2468 Eastwood Blvd.

City State Zip Code  
Prattville AL 36066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Air Force

Occupation  
Air Force Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2011

**Transaction ID : SA11AI.27150**

Amount of Each Receipt this Period

500.00

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

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

2000.00

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

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<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**

Full Name (Last, First, Middle Initial)

**A. Thomas Bryant**

Mailing Address 7761 Farm to Market 592

City	State	Zip Code
Wheeler	TX	79096

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Rancher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	30	/	2011

Transaction ID : SA11AI.36703

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Robert Buckler**

Mailing Address 2692 Mabry Rd. NE

City	State	Zip Code
Atlanta	GA	30319

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Troutman-Sanders Law Firm

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	14	/	2011

Transaction ID : SA11AI.26032

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Robert Buckler**

Mailing Address 2692 Mabry Rd. NE

City	State	Zip Code
Atlanta	GA	30319

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Troutman-Sanders Law Firm

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	28	/	2011

Transaction ID : SA11AI.26033

Amount of Each Receipt this Period

1000.00

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

2200.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Jeremy Carrasco**

Mailing Address 6216 Walling Lane

City State Zip Code  
 Plano TX 75093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31323**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. Angela Case**

Mailing Address 700 Miller Ave.

City State Zip Code  
 Great Falls VA 22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Case Consulting/Arc Realty

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2011

**Transaction ID : SA11AI.33678**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Philip Cavender**

Mailing Address P. O. Box 1579

City State Zip Code  
 Murfreesboro TN 37133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Cavender Financial Group, Inc.

Occupation

Founder and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2011

**Transaction ID : SA11AI.27161**

Amount of Each Receipt this Period

5000.00

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

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

5800.00



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. John Childs**

Mailing Address 165 Sago Palm Rd.

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J.W. Childs Associated, LP

Occupation

Investment Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2011

Transaction ID : SA11AI.26069

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Sandra Click**

Mailing Address 1284 Crabapple Road

City

Big Sandy

State

TX

Zip Code

75755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2011

Transaction ID : SA11AI.36363

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. Sandra Click**

Mailing Address 1284 Crabapple Road

City

Big Sandy

State

TX

Zip Code

75755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2011

Transaction ID : SA11AI.36364

Amount of Each Receipt this Period

25.00

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

5045.12

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Sandra Click**

Mailing Address 1284 Crabapple Road

City State Zip Code  
 Big Sandy TX 75755

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 ▼

256.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2011

**Transaction ID : SA11AI.34303**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. Sandra Click**

Mailing Address 1284 Crabapple Road

City State Zip Code  
 Big Sandy TX 75755

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 ▼

276.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2011

**Transaction ID : SA11AI.34304**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. Sandra Click**

Mailing Address 1284 Crabapple Road

City State Zip Code  
 Big Sandy TX 75755

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 ▼

296.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2011

**Transaction ID : SA11AI.38153**

Amount of Each Receipt this Period

20.12

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

60.36

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Sandra Click**

Mailing Address 1284 Crabapple Road

City

Big Sandy

State

TX

Zip Code

75755

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 ▼

316.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID : SA11AI.38154**

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**B. Joshua Clinard**

Mailing Address P.O. Box 15294

City

Norfolk

State

VA

Zip Code

23511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2011

**Transaction ID : SA11AI.29024**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Joshua Clinard**

Mailing Address P.O. Box 15294

City

Norfolk

State

VA

Zip Code

23511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2011

**Transaction ID : SA11AI.33051**

Amount of Each Receipt this Period

25.00

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

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

120.12

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Joshua Clinard**

Mailing Address P.O. Box 15294

City State Zip Code  
 Norfolk VA 23511

FEC ID number of contributing federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2011

Transaction ID : SA11AI.33050

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Joshua Clinard**

Mailing Address P.O. Box 15294

City State Zip Code  
 Norfolk VA 23511

FEC ID number of contributing federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2011

Transaction ID : SA11AI.33702

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

**C. Joshua Clinard**

Mailing Address P.O. Box 15294

City State Zip Code  
 Norfolk VA 23511

FEC ID number of contributing federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2011

Transaction ID : SA11AI.33701

Amount of Each Receipt this Period

75.00

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

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

170.12

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Joshua Clinard**

Mailing Address P.O. Box 15294

City  
Norfolk

State Zip Code  
VA 23511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Navy

Occupation

Quarter Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2011

Transaction ID : SA11AI.38371

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Kenneth Cooper**

Mailing Address 6564 Valleybrook Drive

City  
Dallas

State Zip Code  
TX 75254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cooper Clinic

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2011

Transaction ID : SA11AI.36331

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Margaret Cooper**

Mailing Address 2341 Glenview Drive

City  
Freeport

State Zip Code  
IL 61032

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 ▼

200.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

Transaction ID : SA11AI.39696

Amount of Each Receipt this Period

5.00

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

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

1080.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Dianne Costa**

Mailing Address 3119 Misty Oak

City State Zip Code  
 Highland Village TX 75077

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31310**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Roy Covert**

Mailing Address 3900 Tahoe Circle Drive

City State Zip Code  
 Springdale AR 72762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Walmart Stores Inc.

Occupation

Director, Store Planning Division

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2011

**Transaction ID : SA11AI.34237**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Paige Crosby**

Mailing Address 17508 Oak Mount Place

City State Zip Code  
 Dallas TX 75287

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31395**

Amount of Each Receipt this Period

5000.00

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

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

5600.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Scott Dacey**

Mailing Address 139 Trent Shores Dr.

City State Zip Code  
Trent Woods NC 28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Requested

Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2011

**Transaction ID : SA11AI.33753**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mark Damien**

Mailing Address 2 Whitney St.

City State Zip Code  
North Grafton MA 01536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2011

**Transaction ID : SA11AI.40688**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Gladys Deyns**

Mailing Address 24 Dewey Place

City State Zip Code  
Lindenhurst NY 11757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Nassau Health Care Corporation

Administrative Assistant, Pediatrics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 24 / 2011

**Transaction ID : SA11AI.33547**

Amount of Each Receipt this Period

50.00

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

800.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Gladys Deyns**

Mailing Address 24 Dewey Place

City State Zip Code  
 Lindenhurst NY 11757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Nassau Health Care Corporation

Occupation  
 Administrative Assistant, Pediatrics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

Transaction ID : SA11AI.38783

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **B. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City State Zip Code  
 Port Richey FL 34668

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 ▼

205.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2011

Transaction ID : SA11AI.33901

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City State Zip Code  
 Port Richey FL 34668

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 ▼

215.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2011

Transaction ID : SA11AI.33902

Amount of Each Receipt this Period

10.00

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

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

95.00



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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City

Port Richey

State

FL

Zip Code

34668

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 ▼

225.24

Date of Receipt

05 / 24 / 2011

Transaction ID : SA11AI.33903

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City

Port Richey

State

FL

Zip Code

34668

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 ▼

235.24

Date of Receipt

06 / 24 / 2011

Transaction ID : SA11AI.38443

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City

Port Richey

State

FL

Zip Code

34668

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 ▼

245.24

Date of Receipt

06 / 24 / 2011

Transaction ID : SA11AI.38444

Amount of Each Receipt this Period

10.00

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

30.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City State Zip Code  
Port Richey FL 34668

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 ▼

255.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2011

**Transaction ID : SA11AI.38445**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City State Zip Code  
Port Richey FL 34668

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 ▼

265.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2011

**Transaction ID : SA11AI.38446**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Evelyn Dodd**

Mailing Address 8521 Winding Wood Drive

City State Zip Code  
Port Richey FL 34668

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 ▼

270.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

**Transaction ID : SA11AI.39305**

Amount of Each Receipt this Period

5.00

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

25.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Joshua Duggar**

Mailing Address 1965 N. Porter Road

City

Springdale

State

AR

Zip Code

72764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Integrity Autopark

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 29 / 2011

**Transaction ID : SA11AI.26345**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Steve Dulin**

Mailing Address 629 Saint James Pl.

City

Coppell

State

TX

Zip Code

75019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Milestone Construction, Inc.

Occupation

Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2011

**Transaction ID : SA11AI.31262**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Joe 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2011

**Transaction ID : SA11AI.34581**

Amount of Each Receipt this Period

50.00

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

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

800.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Joe 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  
 Vintage Associates, Inc.

Occupation  
 Payroll Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

Transaction ID : SA11AI.39535

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. 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  
 Vintage Associates, Inc.

Occupation  
 Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2011

Transaction ID : SA11AI.34580

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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  
 Vintage Associates, Inc.

Occupation  
 Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2011

Transaction ID : SA11AI.38709

Amount of Each Receipt this Period

100.00

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

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

175.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. 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

Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

Transaction ID : SA11AI.39536

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Gregg Esakoff**

Mailing Address 810 Dakota Avenue

City

Whitefish

State

MT

Zip Code

59937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2011

Transaction ID : SA11AI.27622

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Michael Fagan**

Mailing Address 4100 North Fairfax Drive  
Suite 200

City

Arlington

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Logan Technologies, Inc.

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2011

Transaction ID : SA11AI.33682

Amount of Each Receipt this Period

500.00

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

1025.00

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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(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Eugenia Farrow**

Mailing Address 4555 Catina Ln.

City State Zip Code  
 Dallas TX 75229

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

Transaction ID : SA11AI.31377

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Robert Gears**

Mailing Address 3330 Lake Center Drive

City State Zip Code  
 Mount Dora FL 32757

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

M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2011

Transaction ID : SA11AI.34793

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Charles Graves**

Mailing Address 7629 Densmore Avenue

City State Zip Code  
 Van Nuys CA 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2011

Transaction ID : SA11AI.32072

Amount of Each Receipt this Period

100.00

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

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

1600.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Charles Graves**

Mailing Address 7629 Densmore Avenue

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 ▼

400.00

Date of Receipt

04 / 30 / 2011

Transaction ID : SA11AI.37055

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Charles Graves**

Mailing Address 7629 Densmore Avenue

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 ▼

500.00

Date of Receipt

05 / 30 / 2011

Transaction ID : SA11AI.34561

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Charles Graves**

Mailing Address 7629 Densmore Avenue

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 ▼

600.00

Date of Receipt

06 / 30 / 2011

Transaction ID : SA11AI.39329

Amount of Each Receipt this Period

100.00

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

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

300.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Edward Hasley**

Mailing Address 1416 Wood Street

City State Zip Code  
Texarkana TX 75501

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

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2011

**Transaction ID : SA11AI.34292**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Edward Hasley**

Mailing Address 1416 Wood Street

City State Zip Code  
Texarkana TX 75501

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

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2011

**Transaction ID : SA11AI.34293**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Edward Hasley**

Mailing Address 1416 Wood Street

City State Zip Code  
Texarkana TX 75501

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID : SA11AI.38146**

Amount of Each Receipt this Period

25.00

**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  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Edward Hasley**

Mailing Address 1416 Wood Street

City State Zip Code  
 Texarkana TX 75501

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 Y Y  
 06 / 14 / 2011

**Transaction ID : SA11AI.38241**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Mildred Heaton**

Mailing Address P.O. Box 924

City State Zip Code  
 Crestview FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mildred C. Heaton Realty, Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2011

**Transaction ID : SA11AI.26056**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Mildred Heaton**

Mailing Address P.O. Box 924

City State Zip Code  
 Crestview FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mildred C. Heaton Realty, Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2011

**Transaction ID : SA11AI.26965**

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)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Mildred Heaton**

Mailing Address P.O. Box 924

City  
Crestview

State Zip Code  
FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred C. Heaton Realty, Inc.

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2011

Transaction ID : SA11AI.29486

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mildred Heaton**

Mailing Address P.O. Box 924

City  
Crestview

State Zip Code  
FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred C. Heaton Realty, Inc.

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2011

Transaction ID : SA11AI.29487

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Mildred Heaton**

Mailing Address P.O. Box 924

City  
Crestview

State Zip Code  
FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred C. Heaton Realty, Inc.

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2011

Transaction ID : SA11AI.34762

Amount of Each Receipt this Period

50.00

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

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

125.00

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

Use separate schedule(s)  
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(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**

Full Name (Last, First, Middle Initial)

**A. Mildred Heaton**

Mailing Address P.O. Box 924

City  
CrestviewState Zip Code  
FL 32536FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mildred C. Heaton Realty, Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2011

**Transaction ID : SA11AI.34763**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mildred Heaton**

Mailing Address P.O. Box 924

City  
CrestviewState Zip Code  
FL 32536FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mildred C. Heaton Realty, Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2011

**Transaction ID : SA11AI.33837**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mildred Heaton**

Mailing Address P.O. Box 924

City  
CrestviewState Zip Code  
FL 32536FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mildred C. Heaton Realty, Inc.

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2011

**Transaction ID : SA11AI.33838**

Amount of Each Receipt this Period

25.00

**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)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Mildred Heaton**

Mailing Address P.O. Box 924

City  
Crestview

State Zip Code  
FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred C. Heaton Realty, Inc.

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2011

Transaction ID : SA11AI.38086

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mildred Heaton**

Mailing Address P.O. Box 924

City  
Crestview

State Zip Code  
FL 32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred C. Heaton Realty, Inc.

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 27 / 2011

Transaction ID : SA11AI.38764

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Margaret Anne Hicks**

Mailing Address 586 Fairwood Drive

City  
Tallmadge

State Zip Code  
OH 44278

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

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2011

Transaction ID : SA11AI.38696

Amount of Each Receipt this Period

25.00

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

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

100.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Ewald Hueffmeier**

Mailing Address 331 Quail Run Court

City  
Monterey

State Zip Code  
CA 93940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATK

Occupation

Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2011

**Transaction ID : SA11AI.37199**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Ewald Hueffmeier**

Mailing Address 331 Quail Run Court

City  
Monterey

State Zip Code  
CA 93940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATK

Occupation

Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2011

**Transaction ID : SA11AI.37201**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Ewald Hueffmeier**

Mailing Address 331 Quail Run Court

City  
Monterey

State Zip Code  
CA 93940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATK

Occupation

Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 23 / 2011

**Transaction ID : SA11AI.38473**

Amount of Each Receipt this Period

50.00

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

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

150.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Jimmy Humphrey**

Mailing Address 2200 Potomac Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing federal political committee.

C

Name of Employer

Enjet

Occupation

Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2011

Transaction ID : SA11AI.38268

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Jimmy Humphrey**

Mailing Address 2200 Potomac Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing federal political committee.

C

Name of Employer

Enjet

Occupation

Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2011

Transaction ID : SA11AI.38744

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. Jimmy Humphrey**

Mailing Address 2200 Potomac Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing federal political committee.

C

Name of Employer

Enjet

Occupation

Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2011

Transaction ID : SA11AI.38745

Amount of Each Receipt this Period

25.00

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name (Last, First, Middle Initial)

## **A. Jimmy Humphrey**

Mailing Address 2200 Potomac Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Enjet

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

06 / 23 / 2011

Transaction ID : SA11AI.38561

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Christopher Hunt**

Mailing Address 1920 Anastasia lane

City

Atlanta

State

GA

Zip Code

30341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First Love, Inc.

Occupation

Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 16 / 2011

Transaction ID : SA11AI.38284

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. Kyungae Kim**

Mailing Address 19486 E. 58th Circle

City

Aurora

State

CO

Zip Code

80019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Colorado Hospital

Occupation

MLS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

04 / 05 / 2011

Transaction ID : SA11AI.36757

Amount of Each Receipt this Period

30.00

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

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

255.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Kyungae Kim**

Mailing Address 19486 E. 58th Circle

City

Aurora

State

CO

Zip Code

80019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Colorado Hospital

Occupation

MLS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

05 / 11 / 2011

Transaction ID : SA11AI.34447

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kyungae Kim**

Mailing Address 19486 E. 58th Circle

City

Aurora

State

CO

Zip Code

80019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Colorado Hospital

Occupation

MLS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

06 / 14 / 2011

Transaction ID : SA11AI.38259

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Randy King**

Mailing Address 4400 Rheims Place

City

Dallas

State

TX

Zip Code

75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Energy Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

03 / 31 / 2011

Transaction ID : SA11AI.31361

Amount of Each Receipt this Period

2500.00

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

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

2580.00



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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

245.00

Date of Receipt

04 / 28 / 2011

Transaction ID : SA11AI.36104

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. 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

05 / 28 / 2011

Transaction ID : SA11AI.34235

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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 / 2011

Transaction ID : SA11AI.38944

Amount of Each Receipt this Period

50.00

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

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

150.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Bob Koenig**

Mailing Address 180 Greenfield Drive

City

Carencro

State

LA

Zip Code

70520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Andrew Coaching

Occupation

Leadership Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 23 / 2011

Transaction ID : SA11AI.34208

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1000.00

Date of Receipt

05 / 02 / 2011

Transaction ID : SA11AI.33555

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Richard Kund**

Mailing Address 2713 Carrell La

City

Willow Grove

State

PA

Zip Code

19090

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 / 31 / 2011

Transaction ID : SA11AI.33622

Amount of Each Receipt this Period

300.00

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

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

1350.00

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

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<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**

Full Name (Last, First, Middle Initial)

**A. David Landers**

Mailing Address 1751 N. Walnut Road

City	State	Zip Code
Rochester	IL	62563

FEC ID number of contributing federal political committee.

C

Name of Employer  
Illinois Principals Assc.

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-40.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2011

Transaction ID : SA11AI.26268

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. David Landers**

Mailing Address 1751 N. Walnut Road

City	State	Zip Code
Rochester	IL	62563

FEC ID number of contributing federal political committee.

C

Name of Employer  
Illinois Principals Assc.

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-30.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2011

Transaction ID : SA11AI.27673

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. David Landers**

Mailing Address 1751 N. Walnut Road

City	State	Zip Code
Rochester	IL	62563

FEC ID number of contributing federal political committee.

C

Name of Employer  
Illinois Principals Assc.

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2011

Transaction ID : SA11AI.30732

Amount of Each Receipt this Period

10.00

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

30.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. David Landers**

Mailing Address 1751 N. Walnut Road

City  
Rochester

State Zip Code  
IL 62563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Illinois Principals Assc.

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2011

Transaction ID : SA11AI.35740

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **B. Caroline Lewis**

Mailing Address 3750 Duchess Trail

City  
Dallas

State Zip Code  
TX 75229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2011

Transaction ID : SA11AI.36319

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

## **C. James K. Lewis**

Mailing Address 3750 Duchess Trail

City  
Dallas

State Zip Code  
TX 75229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2011

Transaction ID : SA11AI.36317

Amount of Each Receipt this Period

2500.00

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

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

4510.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. James K. Lewis**

Mailing Address 3750 Duchess Trail

City State Zip Code  
 Dallas TX 75229

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2011

Transaction ID : SA11AI.34285

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Mary Libla**

Mailing Address HC 1, Box 800

City State Zip Code  
 Fairdealing MO 63939

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2011

Transaction ID : SA11AI.26272

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Shelby Lorenzen**

Mailing Address 5262 Moore Loop

City State Zip Code  
 Crestview FL 32536

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

M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2011

Transaction ID : SA11AI.33747

Amount of Each Receipt this Period

50.00

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

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

7550.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Shelby Lorenzen**

Mailing Address 5262 Moore Loop

City

Crestview

State

FL

Zip Code

32536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 16 / 2011

Transaction ID : SA11AI.40283

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. John Macek**

Mailing Address 3449 E Easter Place

City

Centennial

State

CO

Zip Code

80122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 29 / 2011

Transaction ID : SA11AI.34451

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Michael Martin**

Mailing Address 1710 Grouse Court

City

Abilene

State

TX

Zip Code

79605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Air Force

Occupation

Aircraft Technician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 22 / 2011

Transaction ID : SA11AI.34436

Amount of Each Receipt this Period

100.00

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

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

250.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Martin**

Mailing Address 1710 Grouse Court

City

Abilene

State

TX

Zip Code

79605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Air Force

Occupation

Aircraft Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 22 / 2011

Transaction ID : SA11AI.38720

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Gilbert A Mathews**

Mailing Address P.O. Box 911

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 ▼

250.00

Date of Receipt

02 / 11 / 2011

Transaction ID : SA11AI.27557

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Gilbert A Mathews**

Mailing Address P.O. Box 911

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

02 / 24 / 2011

Transaction ID : SA11AI.27558

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Gilbert A Mathews**

Mailing Address P.O. Box 911

City State Zip Code  
 Burnsville MN 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2011

Transaction ID : SA11AI.30505

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Gilbert A Mathews**

Mailing Address P.O. Box 911

City State Zip Code  
 Burnsville MN 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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2011

Transaction ID : SA11AI.30508

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Gilbert A Mathews**

Mailing Address P.O. Box 911

City State Zip Code  
 Burnsville MN 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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

Transaction ID : SA11AI.38135

Amount of Each Receipt this Period

100.00

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

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

300.00



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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Gilbert A Mathews**

Mailing Address P.O. Box 911

City State Zip Code  
 Burnsville MN 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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

**Transaction ID : SA11AI.39014**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City State Zip Code  
 O'Fallon IL 62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2011

**Transaction ID : SA11AI.35738**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City State Zip Code  
 O'Fallon IL 62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2011

**Transaction ID : SA11AI.34172**

Amount of Each Receipt this Period

25.00

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

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

150.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City

O'Fallon

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2011

Transaction ID : SA11AI.34170

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City

O'Fallon

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 24 / 2011

Transaction ID : SA11AI.34171

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City

O'Fallon

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 25 / 2011

Transaction ID : SA11AI.38392

Amount of Each Receipt this Period

25.00

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 75 OF 239

(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**

Full Name (Last, First, Middle Initial)

**A. Susan McCarthy**

Mailing Address 529 Turtle Creek Court

City	State	Zip Code
O'Fallon	IL	62269

FEC ID number of contributing federal political committee.

C

Name of Employer

Family Physicians of O'Fallon

Occupation

Medical Records Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2011

Transaction ID : SA11AI.38393

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Rickey McCrary**

Mailing Address 1811 Masters Dr.

City	State	Zip Code
Desoto	TX	75115

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2011

Transaction ID : SA11AI.31338

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Spencer McKiernan**Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Pathmark

Occupation

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2011

Transaction ID : SA11AI.40646

Amount of Each Receipt this Period

100.00

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 76 OF 239

(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**

Full Name (Last, First, Middle Initial)

**A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2011

Transaction ID : SA11AI.40664

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2011

Transaction ID : SA11AI.40665

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2011

Transaction ID : SA11AI.32726

Amount of Each Receipt this Period

25.00

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

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

100.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

03 / 21 / 2011

Transaction ID : SA11AI.32728

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 21 / 2011

Transaction ID : SA11AI.32729

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

03 / 21 / 2011

Transaction ID : SA11AI.32730

Amount of Each Receipt this Period

25.00

**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  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

03 / 26 / 2011

Transaction ID : SA11AI.32731

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

03 / 27 / 2011

Transaction ID : SA11AI.32732

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

04 / 21 / 2011

Transaction ID : SA11AI.33504

Amount of Each Receipt this Period

25.00

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 79 OF 239

(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**

Full Name (Last, First, Middle Initial)

**A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2011

Transaction ID : SA11AI.33505

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2011

Transaction ID : SA11AI.33506

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City	State	Zip Code
Stanhope	NJ	07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2011

Transaction ID : SA11AI.33507

Amount of Each Receipt this Period

25.00

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  
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(check only one)

PAGE 80 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

04 / 26 / 2011

Transaction ID : SA11AI.33508

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

04 / 27 / 2011

Transaction ID : SA11AI.33509

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 21 / 2011

Transaction ID : SA11AI.34736

Amount of Each Receipt this Period

25.00

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

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

100.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

06 / 23 / 2011

Transaction ID : SA11AI.38616

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

06 / 23 / 2011

Transaction ID : SA11AI.38617

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pathmark

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

06 / 23 / 2011

Transaction ID : SA11AI.38618

Amount of Each Receipt this Period

25.00

**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:  
(check only one)

PAGE 82 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Pathmark

Occupation

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

06 / 23 / 2011

Transaction ID : SA11AI.38619

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Spencer McKiernan**

Mailing Address 35 Beverly Road  
#1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee.

C

Name of Employer

Pathmark

Occupation

Requested Using Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

06 / 26 / 2011

Transaction ID : SA11AI.38372

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. M. Myers Mermel**

Mailing Address 375 Park Avenue  
Suite 2402

City New York State NY Zip Code 10152

FEC ID number of contributing federal political committee.

C

Name of Employer

Mermel & McLain

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

01 / 07 / 2011

Transaction ID : SA11AI.25928

Amount of Each Receipt this Period

5000.00

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

5075.00

**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

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(check only one)

PAGE 83 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Anne Miller**

Mailing Address 6274 Willowgate

City State Zip Code  
 Dallas TX 75230

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2011

**Transaction ID : SA11AI.36323**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Norman Miller**

Mailing Address 6274 Willowgate

City State Zip Code  
 Dallas TX 75230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Interstate Batteries

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2011

**Transaction ID : SA11AI.36321**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Marty Morehouse**

Mailing Address 206 Cheshire Road

City State Zip Code  
 Clarksville TN 37043

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2011

**Transaction ID : SA11AI.34335**

Amount of Each Receipt this Period

25.00

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

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

10025.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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**

Full Name (Last, First, Middle Initial)

## **A. Marty Morehouse**

Mailing Address 206 Cheshire Road

City State Zip Code  
 Clarksville TN 37043

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 ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : SA11AI.38243**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Naomi Needham**

Mailing Address 7210 SW 93rd St.

City State Zip Code  
 Wakarusa KS 66546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Industrial Chrome

Occupation

Secretary/Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : SA11AI.35883**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. James Neff**

Mailing Address 23988 Zion Avenue  
 P.O.Box 189

City State Zip Code  
 Winsted MN 55395

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2011

**Transaction ID : SA11AI.38740**

Amount of Each Receipt this Period

50.00

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

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

125.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Kristi Nimmo**

Mailing Address 9940 Westgate Court

City State Zip Code  
 Lenexa KS 66215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mortgage Lenders of America

Occupation  
Loan Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2011

**Transaction ID : SA11AI.30870**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Douglas Oines**

Mailing Address 1280 Taylorsville Road

City State Zip Code  
 Washington Crossin PA 18977

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clearview Cinemas

Occupation  
Vice President - Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 07 2011

**Transaction ID : SA11AI.26680**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. 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

Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 25 2011

**Transaction ID : SA11AI.30442**

Amount of Each Receipt this Period

50.00

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

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

800.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2011

**Transaction ID : SA11AI.35521**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. 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

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2011

**Transaction ID : SA11AI.35522**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2011

**Transaction ID : SA11AI.34092**

Amount of Each Receipt this Period

50.00

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

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

200.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Tim Owen**

Mailing Address 5261 N. Williams Road

City

Saint Johns

State

MI

Zip Code

48879

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vertafore, Inc.

Occupation

Vice President of Product Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 05 / 2011

Transaction ID : SA11AI.38037

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Jennifer Packer**

Mailing Address 1239 Veeder Drive

City

Hewlett

State

NY

Zip Code

11557

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 ▼

5000.00

Date of Receipt

03 / 07 / 2011

Transaction ID : SA11AI.40686

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Paul Packer**

Mailing Address 1239 Veeder Dr.

City

Hewlett

State

NY

Zip Code

11557

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Globis Capital Advisors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

03 / 07 / 2011

Transaction ID : SA11AI.28664

Amount of Each Receipt this Period

5000.00

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

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

10100.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Star Parker**

Mailing Address 107 W. Marquita

City State Zip Code  
 San Clemente CA 92672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Center for Urban Renewal & Edu

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2011

**Transaction ID : SA11AI.34605**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Betty Payne**

Mailing Address P.O. Box 1289

City State Zip Code  
 Rowlett TX 75030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Studio One Ten

Occupation  
Hairdresser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2011

**Transaction ID : SA11AI.31272**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Kristin Pelphrey**

Mailing Address 5765 Bozeman  
 No. 2201

City State Zip Code  
 Plano TX 75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31268**

Amount of Each Receipt this Period

500.00

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

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

2000.00



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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Gregory Poe**

Mailing Address 675 East Street NW  
Apt. 310

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Logos

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2011

Transaction ID : SA11AI.34753

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Gregory Prunier**

Mailing Address 20432 Greenfield Road

City State Zip Code  
Germantown MD 20876

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2011

Transaction ID : SA11AI.32959

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Wade Pulliam**

Mailing Address 1401 N. Taft St.  
Apt. 1027

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Logos Technologies

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2011

Transaction ID : SA11AI.33680

Amount of Each Receipt this Period

500.00

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

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

1600.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Ann Quest**

Mailing Address 5609 Ursula Ln.

City State Zip Code  
 Dallas TX 75229

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31375**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. Jerry Rains**

Mailing Address 430 Kyllie Drive

City State Zip Code  
 Millington TN 38053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

All American Moving Group, LLC

Occupation

Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2011

**Transaction ID : SA11AI.35064**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **c. Jerry Rains**

Mailing Address 430 Kyllie Drive

City State Zip Code  
 Millington TN 38053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

All American Moving Group, LLC

Occupation

Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2011

**Transaction ID : SA11AI.33945**

Amount of Each Receipt this Period

50.00

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

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

2600.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Jerry Rains**

Mailing Address 430 Kyllie Drive

City  
Millington

State Zip Code  
TN 38053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
All American Moving Group, LLC

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2011

**Transaction ID : SA11AI.33946**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Arline Ramon**

Mailing Address 2140 Grandview Court

City  
Cedar Hill

State Zip Code  
TX 75104

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2011

**Transaction ID : SA11AI.34275**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. M. Brian Ramon**

Mailing Address 2140 Grandview Court

City  
Cedar Hill

State Zip Code  
TX 75104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MBRGFR

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2011

**Transaction ID : SA11AI.31327**

Amount of Each Receipt this Period

2000.00

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

3550.00

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

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

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<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**

Full Name (Last, First, Middle Initial)

**A. M. Brian Ramon**

Mailing Address 2140 Grandview Court

City	State	Zip Code
Cedar Hill	TX	75104

FEC ID number of contributing federal political committee.

C

Name of Employer

MBRGFR

Occupation

Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2011

Transaction ID : SA11AI.34277

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. 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 Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2011

Transaction ID : SA11AI.32170

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. 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 Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2011

Transaction ID : SA11AI.37129

Amount of Each Receipt this Period

100.00

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

1700.00

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

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. 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 Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2011

Transaction ID : SA11AI.34597

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. 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 Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2011

Transaction ID : SA11AI.38913

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Keresa Richardson**

Mailing Address 2102 Augusta

City State Zip Code  
 McKinney TX 75070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Ben Franklin Plumbing

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2011

Transaction ID : SA11AI.36282

Amount of Each Receipt this Period

500.00

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

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

700.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Richard Rock**

Mailing Address 1154 Nevada Avenue

City

San Jose

State

CA

Zip Code

95125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The CAPROCK Group

Occupation

Financial Advisor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 11 / 2011

Transaction ID : SA11AI.28419

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Richard Rock**

Mailing Address 1154 Nevada Avenue

City

San Jose

State

CA

Zip Code

95125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The CAPROCK Group

Occupation

Financial Advisor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 31 / 2011

Transaction ID : SA11AI.34644

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. James Sammons**

Mailing Address 4200 S. Hulen

Ste. 530

City

Fort Worth

State

TX

Zip Code

76109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

03 / 31 / 2011

Transaction ID : SA11AI.31487

Amount of Each Receipt this Period

5000.00

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

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

6500.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Joan Schmidt**

Mailing Address 4506 Providence Point Place SE

City State Zip Code  
Issaquah WA 98029

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2011

**Transaction ID : SA11AI.37363**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Joan Schmidt**

Mailing Address 4506 Providence Point Place SE

City State Zip Code  
Issaquah WA 98029

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2011

**Transaction ID : SA11AI.37364**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Joel Sears**

Mailing Address 4014 Olmsted

City State Zip Code  
Spokane WA 99223

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2011

**Transaction ID : SA11AI.32497**

Amount of Each Receipt this Period

500.00

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

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

1500.00

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

Use separate schedule(s)  
for each category of the  
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(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**

Full Name (Last, First, Middle Initial)

**A. George Shafer**

Mailing Address 11711 Forest Ct.

City	State	Zip Code
Dallas	TX	75230

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2011

Transaction ID : SA11AI.31381

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Roger Sherman**

Mailing Address 1124 12th Avenue NW

City	State	Zip Code
Arab	AL	35016

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 ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2011

Transaction ID : SA11AI.34966

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Roger Sherman**

Mailing Address 1124 12th Avenue NW

City	State	Zip Code
Arab	AL	35016

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

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2011

Transaction ID : SA11AI.33915

Amount of Each Receipt this Period

100.00

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

1200.00

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  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Roger Sherman**

Mailing Address 1124 12th Avenue NW

City State Zip Code  
 Arab AL 35016

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

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2011

**Transaction ID : SA11AI.38025**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. John Shields**

Mailing Address 817 Lancelot Circle

City State Zip Code  
 Collierville TN 38017

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

M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2011

**Transaction ID : SA11AI.33944**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Carmen Smallwood**

Mailing Address 18824 Townline Road

City State Zip Code  
 Mokena IL 60448

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

M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2011

**Transaction ID : SA11AI.38441**

Amount of Each Receipt this Period

25.00

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

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

625.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Carmen Smallwood**

Mailing Address 18824 Townline Road

City State Zip Code  
Mokena IL 60448

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

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2011

**Transaction ID : SA11AI.38442**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Jim Smith**

Mailing Address 300 Glencoe Street

City State Zip Code  
Denver CO 80220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Serial Entrepreneur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2011

**Transaction ID : SA11AI.31795**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Linda Smith**

Mailing Address 113 Island Avenue

City State Zip Code  
Buckhannon WV 26201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Riverside Bed & Breakfast

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID : SA11AI.29075**

Amount of Each Receipt this Period

100.00

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

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

5125.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Linda Smith**

Mailing Address 113 Island Avenue

City State Zip Code  
 Buckhannon WV 26201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Riverside Bed & Breakfast

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : SA11AI.33097**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Donald Spence**

Mailing Address 1728 Manor Lane

City State Zip Code  
 Plano TX 75093

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 ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2011

**Transaction ID : SA11AI.31321**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Neil Steiner**

Mailing Address 671 N Armistead Street

City State Zip Code  
 Alexandria VA 22312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ. of Southern California

Occupation

Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2011

**Transaction ID : SA11AI.33675**

Amount of Each Receipt this Period

50.00

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

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

2150.00

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

Use separate schedule(s)  
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(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**

Full Name (Last, First, Middle Initial)

**A. William Stephens**

Mailing Address 6724 Princess Anne Lane

City	State	Zip Code
Falls Church	VA	22042

FEC ID number of contributing federal political committee.

C

Name of Employer

KLGates

Occupation

Government Affairs Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2011

Transaction ID : SA11AI.33677

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2011

Transaction ID : SA11AI.33593

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. 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 M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2011

Transaction ID : SA11AI.37915

Amount of Each Receipt this Period

50.00

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

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

600.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Louis Stevens**

Mailing Address 1415 Wilderness Road

City State Zip Code  
West Palm Beach FL 33409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cheney Brothers, Inc.

Occupation

Sales Analyst/Trainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2011

**Transaction ID : SA11AI.27033**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Mike Swaim**

Mailing Address 1907 Baker Rd.

City State Zip Code  
High Point NC 27263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Management Resource Systems, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 30 2011

**Transaction ID : SA11AI.33117**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Judith Taber**

Mailing Address 1421 Brighton Street

City State Zip Code  
La Habra CA 90631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Century 21 Discovery

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2011

**Transaction ID : SA11AI.39720**

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Susan Thomas-Williams**

Mailing Address 867 Main Street

City

Gibbsland

State

LA

Zip Code

71028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Timber And Investments

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2011

Transaction ID : SA11AI.39236

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Beverly Volentine**

Mailing Address 978 Tulip Rd.

City

Athens

State

LA

Zip Code

71003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farm Co-Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2011

Transaction ID : SA11AI.35999

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. Amy Walker**

Mailing Address 8690 E. Highlands Circle

City

Palmer

State

AK

Zip Code

99645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2011

Transaction ID : SA11AI.38151

Amount of Each Receipt this Period

12.00

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

1517.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Amy Walker**

Mailing Address 8690 E. Highlands Circle

City State Zip Code  
Palmer AK 99645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

06 / 10 / 2011

**Transaction ID : SA11AI.38152**

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

**B. Amy Walker**

Mailing Address 8690 E. Highlands Circle

City State Zip Code  
Palmer AK 99645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

06 / 22 / 2011

**Transaction ID : SA11AI.38721**

Amount of Each Receipt this Period

12.00

Full Name (Last, First, Middle Initial)

**C. Amy Walker**

Mailing Address 8690 E. Highlands Circle

City State Zip Code  
Palmer AK 99645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.12

Date of Receipt

06 / 30 / 2011

**Transaction ID : SA11AI.39530**

Amount of Each Receipt this Period

20.12

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

44.12

**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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(check only one)

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Jessica Watson**

Mailing Address 106 Cypress Avenue

City State Zip Code  
 Wrightsville Beach NC 28480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Independent Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2011

**Transaction ID : SA11AI.29176**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Anita Wells**

Mailing Address 3606 Reynolds Park Road

City State Zip Code  
 Paragould AR 72450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Health Systems

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2011

**Transaction ID : SA11AI.34229**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Anita Wells**

Mailing Address 3606 Reynolds Park Road

City State Zip Code  
 Paragould AR 72450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Health Systems

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2011

**Transaction ID : SA11AI.38715**

Amount of Each Receipt this Period

100.00

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

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

650.00



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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

224.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 16 2011

Transaction ID : SA11AI.33804

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

234.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 20 2011

Transaction ID : SA11AI.33805

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

244.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2011

Transaction ID : SA11AI.33806

Amount of Each Receipt this Period

10.00

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

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

45.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 106 OF 239

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

254.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2011

**Transaction ID : SA11AI.38351**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **B. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

264.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2011

**Transaction ID : SA11AI.38540**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. Maxine Wilson**

Mailing Address 137 Walnut Hill Drive SE

City State Zip Code  
 Calhoun GA 30701

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 ▼

269.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : SA11AI.39513**

Amount of Each Receipt this Period

5.00

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

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

25.00

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

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

FOR LINE NUMBER: PAGE 107 OF 239  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Lisa Young-Prendergast**

Mailing Address 1224 Cedar Place

City State Zip Code  
 Davis CA 95616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TPMG

Occupation

Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2011

**Transaction ID : SA11AI.38374**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Roy Zaloom**

Mailing Address 222 Nottingham Road

City State Zip Code  
 Ramsey NJ 07446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Zaloom Marketing Corp.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2011

**Transaction ID : SA11AI.33493**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

275.00

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

128508.92

# **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)

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

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. AMERICANS IN CONTACT PAC**

Mailing Address PO BOX 204

City State Zip Code  
 ALEXANDRIA VA 22313

FEC ID number of contributing  
federal political committee.

**C** C00455444

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**05** / **09** / **2011**

**Transaction ID : SA11C.33642**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. CITIZENS UNITED POLITICAL VICTORY FUND**

Mailing Address 1006 PENNSYLVANIA AVE SE

City State Zip Code  
 WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00295527

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **09** / **2011**

**Transaction ID : SA11C.33632**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. GOVERNMENT IS NOT GOD**

Mailing Address PO BOX 77237

City State Zip Code  
 WASHINGTON DC 20013

FEC ID number of contributing  
federal political committee.

**C** C00297531

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **03** / **2011**

**Transaction ID : SA11C.40486**

Amount of Each Receipt this Period

1000.00

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

8000.00

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

8000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. 5 Oaks Duck Lodge**

Mailing Address 1895 Highway 152

City  
HumphreyState  
ARZip Code  
72073Purpose of Disbursement  
Fundraising Event Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2011

**Transaction ID : SB21B.4368**

Amount of Each Disbursement this Period

19648.00
----------

Full Name (Last, First, Middle Initial)

**B. American Caging**Mailing Address 4850 Wright Road  
Suite 168City  
StaffordState  
TXZip Code  
77477-4114Purpose of Disbursement  
Direct Mail Caging Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2011

**Transaction ID : SB21B.4319**

Amount of Each Disbursement this Period

770.00
--------

Full Name (Last, First, Middle Initial)

**C. American Caging**Mailing Address 4850 Wright Road  
Suite 168City  
StaffordState  
TXZip Code  
77477-4114Purpose of Disbursement  
Direct Mail Caging Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2011

**Transaction ID : SB21B.4348**

Amount of Each Disbursement this Period

745.59
--------

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

21163.59
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. American Caging**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2011

Mailing Address 4850 Wright Road  
Suite 168

City Stafford State TX Zip Code 77477-4114

Purpose of Disbursement  
Direct Mail Caging Services

Candidate Name

Category/  
Type**Transaction ID : SB21B.4429**

Amount of Each Disbursement this Period

74.35
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Aptix DBA MailStreet**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2011

Mailing Address Dept. CH19172

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Blackberry Service

Candidate Name

Category/  
Type**Transaction ID : SB21B.4284**

Amount of Each Disbursement this Period

296.62
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Aptix DBA MailStreet**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2011

Mailing Address Dept. CH19172

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Blackberry Service

Candidate Name

Category/  
Type**Transaction ID : SB21B.4349**

Amount of Each Disbursement this Period

122.43
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

493.40
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Apptix DBA MailStreet**

Mailing Address Dept. CH19172

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Blackberry Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 16 2011**Transaction ID : SB21B.4447**

Amount of Each Disbursement this Period

122.43

Full Name (Last, First, Middle Initial)

**B. Apptix DBA MailStreet**

Mailing Address Dept. CH19172

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Blackberry Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 20 2011**Transaction ID : SB21B.37707**

Amount of Each Disbursement this Period

122.43

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address PO Box 650661

City Dallas State TX Zip Code 75265

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 06 2011**Transaction ID : SB21B.4131**

Amount of Each Disbursement this Period

320.33

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

565.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2011

Mailing Address PO Box 650661

City	State	Zip Code
Dallas	TX	75265

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type**Transaction ID : SB21B.4201**

Amount of Each Disbursement this Period

322.76
--------

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) ▼

Full Name (Last, First, Middle Initial)

**B. AT&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2011

Mailing Address PO Box 650661

City	State	Zip Code
Dallas	TX	75265

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type**Transaction ID : SB21B.4259**

Amount of Each Disbursement this Period

321.92
--------

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) ▼

Full Name (Last, First, Middle Initial)

**C. AT&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2011

Mailing Address PO Box 650661

City	State	Zip Code
Dallas	TX	75265

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type**Transaction ID : SB21B.4331**

Amount of Each Disbursement this Period

321.92
--------

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

966.60
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 650661

City	State	Zip Code
Dallas	TX	75265

Purpose of Disbursement  
Telephone Service

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2011

**Transaction ID : SB21B.4428**

Amount of Each Disbursement this Period

321.37
--------

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address PO Box 650661

City	State	Zip Code
Dallas	TX	75265

Purpose of Disbursement  
Telephone Service

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2011

**Transaction ID : SB21B.37682**

Amount of Each Disbursement this Period

368.08
--------

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement  
Telephone Service

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2011

**Transaction ID : SB21B.4158**

Amount of Each Disbursement this Period

208.72
--------

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

898.17
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream      State IL      Zip Code 60197

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      18      2011
**Transaction ID : SB21B.4228**

Amount of Each Disbursement this Period

203.91

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream      State IL      Zip Code 60197

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      18      2011
**Transaction ID : SB21B.4283**

Amount of Each Disbursement this Period

193.70

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream      State IL      Zip Code 60197

Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2011
**Transaction ID : SB21B.4347**

Amount of Each Disbursement this Period

253.51

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

651.12

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement  
Telephone Service

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) ▼
-------------------	--

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2011

**Transaction ID : SB21B.4452**

Amount of Each Disbursement this Period

199.68
--------

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement  
Telephone Service

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) ▼
-------------------	--

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2011

**Transaction ID : SB21B.37714**

Amount of Each Disbursement this Period

200.27
--------

Full Name (Last, First, Middle Initial)

**C. ccAdvertising**Mailing Address 5900 Fort Drive  
Suite 302

City	State	Zip Code
Centerville	VA	20121

Purpose of Disbursement  
Fundraising Survey

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) ▼
-------------------	--

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2011

**Transaction ID : SB21B.4370**

Amount of Each Disbursement this Period

500.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

899.95

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. ccAdvertising**Mailing Address 5900 Fort Drive  
Suite 302

City Centerville State VA Zip Code 20121

Purpose of Disbursement  
Fundraising Survey

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2011**Transaction ID : SB21B.4453**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Clockwork Systems**

Mailing Address 6001 Gloster Road

City Bethesda State MD Zip Code 20816-1147

Purpose of Disbursement  
Direct Mail - PAC Fundraising

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2011**Transaction ID : SB21B.4354**

Amount of Each Disbursement this Period

1149.39

Full Name (Last, First, Middle Initial)

**C. Judith A. Crouch**

Mailing Address 59 Belmont Drive

City Little Rock State AR Zip Code 72204

Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 14 / 2011**Transaction ID : SB21B.40503**

Amount of Each Disbursement this Period

1299.36

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

12448.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Dresner, Wickers & Associates**

Mailing Address 655 Third Street

City	State	Zip Code
San Francisco	CA	94107-1901

Purpose of Disbursement  
Direct Mail - PAC Fundraising

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2011

**Transaction ID : SB21B.4352**

Amount of Each Disbursement this Period

16520.00
----------

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City	State	Zip Code
Columbia	SC	29204

Purpose of Disbursement  
Reimbursement - Insurance & Telephone

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	06	/	2011

**Transaction ID : SB21B.4120**

Amount of Each Disbursement this Period

243.36
--------

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City	State	Zip Code
Columbia	SC	29204

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2011

**Transaction ID : SB21B.4151**

Amount of Each Disbursement this Period

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

21763.36
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      31      2011
**Transaction ID : SB21B.4188**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Reimbursement - Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      08      2011
**Transaction ID : SB21B.4210**

Amount of Each Disbursement this Period

400.31

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      15      2011
**Transaction ID : SB21B.4218**

Amount of Each Disbursement this Period

5000.00

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

10400.31

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Reimbursement - Insurance & Telephone

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      18      2011
**Transaction ID : SB21B.4227**

Amount of Each Disbursement this Period

243.36

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      28      2011
**Transaction ID : SB21B.4240**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      15      2011
**Transaction ID : SB21B.4274**

Amount of Each Disbursement this Period

1250.00

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

6493.36

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Reimbursement - Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      28      2011
**Transaction ID : SB21B.4303**

Amount of Each Disbursement this Period

141.54

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      01      2011
**Transaction ID : SB21B.4308**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2011
**Transaction ID : SB21B.4340**

Amount of Each Disbursement this Period

1250.00

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

2641.54



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      28      2011
**Transaction ID : SB21B.4455**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Reimbursement - Insurance & Telephone

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      09      2011
**Transaction ID : SB21B.4430**

Amount of Each Disbursement this Period

243.36

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City Columbia      State SC      Zip Code 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      13      2011
**Transaction ID : SB21B.4459**

Amount of Each Disbursement this Period

1250.00

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

2743.36

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City	State	Zip Code
Columbia	SC	29204

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2011

**Transaction ID : SB21B.37718**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City	State	Zip Code
Columbia	SC	29204

Purpose of Disbursement  
Reimbursement - Postage

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2011

**Transaction ID : SB21B.37683**

Amount of Each Disbursement this Period

176.73
--------

Full Name (Last, First, Middle Initial)

**C. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City	State	Zip Code
Columbia	SC	29204

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2011

**Transaction ID : SB21B.37723**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2676.73
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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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City State Zip Code  
Columbia SC 29204

Purpose of Disbursement  
Reimbursement - Travel & Meals

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 27 / 2011

**Transaction ID : SB21B.37715**

Amount of Each Disbursement this Period

1259.68

Full Name (Last, First, Middle Initial)

**B. J. Hogan Gidley**

Mailing Address 2507 Rigby Drive

City State Zip Code  
Columbia SC 29204

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2011

**Transaction ID : SB21B.37831**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. GSL Solutions, Inc.**

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City State Zip Code  
Tampa FL 33607

Purpose of Disbursement  
Web Development/Hosting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 20 / 2011

**Transaction ID : SB21B.4172**

Amount of Each Disbursement this Period

4721.46

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

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

7231.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. GSL Solutions, Inc.**

Date of Disbursement

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

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City Tampa State FL Zip Code 33607

Purpose of Disbursement  
Web Development/Hosting

Candidate Name

Category/  
Type**Transaction ID : SB21B.4209**

Amount of Each Disbursement this Period

2363.31

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. GSL Solutions, Inc.**

Date of Disbursement

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

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City Tampa State FL Zip Code 33607

Purpose of Disbursement  
Web Development/Hosting

Candidate Name

Category/  
Type**Transaction ID : SB21B.4433**

Amount of Each Disbursement this Period

5484.00

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. GSL Solutions, Inc.**

Date of Disbursement

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

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City Tampa State FL Zip Code 33607

Purpose of Disbursement  
Web Development/Hosting

Candidate Name

Category/  
Type**Transaction ID : SB21B.4448**

Amount of Each Disbursement this Period

3526.58

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

11373.89

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. GSL Solutions, Inc.**

Date of Disbursement

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

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City Tampa State FL Zip Code 33607

Purpose of Disbursement  
Web Development/Hosting

Candidate Name

Category/  
Type**Transaction ID : SB21B.37708**

Amount of Each Disbursement this Period

1563.44

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

Full Name (Last, First, Middle Initial)

**B. Harland Clarke**

Date of Disbursement

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

Mailing Address 10931 Laureate Drive

City San Antonio State TX Zip Code 78249

Purpose of Disbursement  
Office Expense - Check Order

Candidate Name

Category/  
Type**Transaction ID : SB21B.4420**

Amount of Each Disbursement this Period

112.97

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

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Date of Disbursement

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

Mailing Address 3226 Stonepine

City Bryant State AR Zip Code 72022

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type**Transaction ID : SB21B.4152**

Amount of Each Disbursement this Period

1500.00

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3176.41

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Reimbursement - Mileage

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 20 2011**Transaction ID : SB21B.4171**

Amount of Each Disbursement this Period

64.12

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 31 2011**Transaction ID : SB21B.4189**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Reimbursement - Insurance & Mileage

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 04 2011**Transaction ID : SB21B.4200**

Amount of Each Disbursement this Period

210.09

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

1774.21

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 15 2011**Transaction ID : SB21B.4219**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 28 2011**Transaction ID : SB21B.4241**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Reimbursement - Insurance, Mileage & Postage

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 03 2011**Transaction ID : SB21B.4249**

Amount of Each Disbursement this Period

213.80

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

3213.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022
Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 15 2011
**Transaction ID : SB21B.4275**

Amount of Each Disbursement this Period

1650.00

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022
Purpose of Disbursement  
Reimbursement - Mileage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 18 2011
**Transaction ID : SB21B.4285**

Amount of Each Disbursement this Period

143.70

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022
Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 01 2011
**Transaction ID : SB21B.4309**

Amount of Each Disbursement this Period

1650.00

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

3443.70



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Reimbursement - Insurance

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 08 2011**Transaction ID : SB21B.4326**

Amount of Each Disbursement this Period

130.75

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 15 2011**Transaction ID : SB21B.4341**

Amount of Each Disbursement this Period

1650.00

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022Purpose of Disbursement  
Payroll

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 28 2011**Transaction ID : SB21B.4456**

Amount of Each Disbursement this Period

1650.00

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

3430.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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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**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City	State	Zip Code
Bryant	AR	72022

Purpose of Disbursement  
Reimbursement - Insurance & Mileage

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2011

**Transaction ID : SB21B.4431**

Amount of Each Disbursement this Period

249.76
--------

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City	State	Zip Code
Bryant	AR	72022

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2011

**Transaction ID : SB21B.4460**

Amount of Each Disbursement this Period

1650.00
---------

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City	State	Zip Code
Bryant	AR	72022

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2011

**Transaction ID : SB21B.37719**

Amount of Each Disbursement this Period

1650.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3549.76
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(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**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City Bryant	State AR	Zip Code 72022
----------------	-------------	-------------------

Purpose of Disbursement  
Reimbursement - Insurance & Mileage

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) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2011

**Transaction ID : SB21B.37692**

Amount of Each Disbursement this Period

237.94
--------

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City Bryant	State AR	Zip Code 72022
----------------	-------------	-------------------

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) ▼
-------------------	--

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2011

**Transaction ID : SB21B.37724**

Amount of Each Disbursement this Period

1650.00
---------

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City Bryant	State AR	Zip Code 72022
----------------	-------------	-------------------

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) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

**Transaction ID : SB21B.37832**

Amount of Each Disbursement this Period

1650.00
---------

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

3537.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Heritage Communications, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2011

Mailing Address 2402 Wildwood Ave.

City	State	Zip Code
Sherwood	AR	72120

Purpose of Disbursement  
Telephone Equipment Lease

Candidate Name

Category/  
Type**Transaction ID : SB21B.4159**

Amount of Each Disbursement this Period

199.31
--------

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) ▼

Full Name (Last, First, Middle Initial)

**B. Heritage Communications, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2011

Mailing Address 2402 Wildwood Ave.

City	State	Zip Code
Sherwood	AR	72120

Purpose of Disbursement  
Telephone Equipment Lease

Candidate Name

Category/  
Type**Transaction ID : SB21B.4207**

Amount of Each Disbursement this Period

199.31
--------

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) ▼

Full Name (Last, First, Middle Initial)

**C. Heritage Communications, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2011

Mailing Address 2402 Wildwood Ave.

City	State	Zip Code
Sherwood	AR	72120

Purpose of Disbursement  
Telephone Equipment Lease

Candidate Name

Category/  
Type**Transaction ID : SB21B.4258**

Amount of Each Disbursement this Period

199.31
--------

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

597.93
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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

HUCK PAC



199.31

199.31

Age Group	Percentage
18-24	199.31
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. 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: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2011**Transaction ID : SB21B.40678**

Amount of Each Disbursement this Period

885.00

Full Name (Last, First, Middle Initial)

**B. 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: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2011**Transaction ID : SB21B.40679**

Amount of Each Disbursement this Period

2543.75

Full Name (Last, First, Middle Initial)

**C. 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: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2011**Transaction ID : SB21B.40680**

Amount of Each Disbursement this Period

1387.50

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

4816.25

<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

HUCK PAC

### A. Lauren Huckabee

Mailing Address 500 Parliament Street

City	State	Zip Code
Little Rock	AR	72211

Purpose of Disbursement
Reimbursement - Insurance, Telephone Service & Professional License

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

The image shows three 3x3 grids representing the numbers 01, 06, and 2011 using the letters M, D, and Y. The first grid for '01' has 'M' in the top-left and top-right positions, and '01' in the center. The second grid for '06' has 'D' in the top-left and top-right positions, and '06' in the center. The third grid for '2011' has 'Y' in the top-left, top-middle, top-right, and middle-right positions, and '2011' in the center.

Transaction ID : SB21B.4123

Amount of Each Disbursement this Period

575.00

Full Name (Last, First, Middle Initial)

### B. Lauren Huckabee

Mailing Address 500 Parliament Street

City	State	Zip Code
Little Rock	AR	72211

Purpose of Disbursement	
Payroll	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4153

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

### C. Lauren Huckabee

Mailing Address 500 Parliament Street

City	State	Zip Code
Little Rock	AR	72211

Purpose of Disbursement	
Reimbursement - Insurance & Telephone	

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) ▼		

Date of Disbursement

Transaction ID : SB21B.4180

Amount of Each Disbursement this Period

375.00

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

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

2450.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      31      2011
**Transaction ID : SB21B.4190**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      15      2011
**Transaction ID : SB21B.4220**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      28      2011
**Transaction ID : SB21B.4242**

Amount of Each Disbursement this Period

2500.00

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

5500.00



<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

HUCK PAC

### A. Lauren Huckabee

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4244

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

375.00

### B. Lauren Huckabee

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4276

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

1937.50

### C. Lauren Huckabee

Date of Disbursement

03 / 25 / 2011

Transaction ID : SB21B.4299

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

427.84

2740.34

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2011
**Transaction ID : SB21B.4310**

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

**B. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Reimbursement - Insurance, Telephone & Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 08 / 2011
**Transaction ID : SB21B.4328**

Amount of Each Disbursement this Period

874.05

Full Name (Last, First, Middle Initial)

**C. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2011
**Transaction ID : SB21B.4342**

Amount of Each Disbursement this Period

1937.50

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

4749.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      28      2011
**Transaction ID : SB21B.4457**

Amount of Each Disbursement this Period

6197.50

Full Name (Last, First, Middle Initial)

**B. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Reimbursement - Insurance & Telephone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      09      2011
**Transaction ID : SB21B.4434**

Amount of Each Disbursement this Period

625.00

Full Name (Last, First, Middle Initial)

**C. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      13      2011
**Transaction ID : SB21B.4461**

Amount of Each Disbursement this Period

1937.50

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

8760.00

# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock State AR Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 01 / 2011

**Transaction ID : SB21B.37720**

Amount of Each Disbursement this Period

3662.50

Full Name (Last, First, Middle Initial)

## **B. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock State AR Zip Code 72211

Purpose of Disbursement  
Reimbursement - Insurance & Telephone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 02 / 2011

**Transaction ID : SB21B.37686**

Amount of Each Disbursement this Period

375.00

Full Name (Last, First, Middle Initial)

## **C. Lauren Huckabee**

Mailing Address 500 Parliament Street

City Little Rock State AR Zip Code 72211

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 15 / 2011

**Transaction ID : SB21B.37725**

Amount of Each Disbursement this Period

1937.50

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

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

5975.00

<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

HUCK PAC

### A. Lauren Huckabee

Mailing Address 500 Parliament Street

City	State	Zip Code
Little Rock	AR	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: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.37833

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

### B. David M. John

Mailing Address 15 Thankful Bradley Road

City	State	Zip Code
West Redding	CT	06896

Purpose of Disbursement	Payroll

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
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93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

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) ▼		

Date of Disbursement

M M / D D / Y Y Y Y  
01 14 2011

Transaction ID : SB21B.4154

Amount of Each Disbursement this Period

1751.00

Full Name (Last, First, Middle Initial)

C. David M. John

Mailing Address 15 Thankful Bradley Road

City	State	Zip Code
West Redding	CT	06896

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

1751.00

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

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

5439.50

<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

HUCK PAC

### A. David M. John

Category/  
Type

1751.00

State:  District:

### B. David M. John

Category/  
Type

1751.00

State:  District:

**C. David M. John**

Category/  
Type

State:  District:

3642.00

# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. David M. John**

Mailing Address 15 Thankful Bradley Road

City State Zip Code  
West Redding CT 06896

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2011

**Transaction ID : SB21B.4277**

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

**B. David M. John**

Mailing Address 15 Thankful Bradley Road

City State Zip Code  
West Redding CT 06896

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2011

**Transaction ID : SB21B.4311**

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

**C. David M. John**

Mailing Address 15 Thankful Bradley Road

City State Zip Code  
West Redding CT 06896

Purpose of Disbursement  
Reimbursement - Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2011

**Transaction ID : SB21B.4327**

Amount of Each Disbursement this Period

182.00

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

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

4057.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. David M. John**

Mailing Address 15 Thankful Bradley Road

City

West Redding

State

CT

Zip Code

06896

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
04D D D /  
15Y Y Y Y Y Y  
2011**Transaction ID : SB21B.4343**

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

**B. David M. John**

Mailing Address 15 Thankful Bradley Road

City

West Redding

State

CT

Zip Code

06896

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
04D D D /  
28Y Y Y Y Y Y  
2011**Transaction ID : SB21B.4458**

Amount of Each Disbursement this Period

1937.50

Full Name (Last, First, Middle Initial)

**C. David M. John**

Mailing Address 15 Thankful Bradley Road

City

West Redding

State

CT

Zip Code

06896

Purpose of Disbursement

Reimbursement - Telephone

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
05D D D /  
09Y Y Y Y Y Y  
2011**Transaction ID : SB21B.4432**

Amount of Each Disbursement this Period

70.00

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

3945.00

70.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. David M. John**

Mailing Address 15 Thankful Bradley Road

City	State	Zip Code
West Redding	CT	06896

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2011

**Transaction ID : SB21B.4462**

Amount of Each Disbursement this Period

1937.50
---------

Full Name (Last, First, Middle Initial)

**B. David M. John**

Mailing Address 15 Thankful Bradley Road

City	State	Zip Code
West Redding	CT	06896

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2011

**Transaction ID : SB21B.37721**

Amount of Each Disbursement this Period

1937.50
---------

Full Name (Last, First, Middle Initial)

**C. David M. John**

Mailing Address 15 Thankful Bradley Road

City	State	Zip Code
West Redding	CT	06896

Purpose of Disbursement  
Reimbursement - Telephone

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2011

**Transaction ID : SB21B.37691**

Amount of Each Disbursement this Period

70.00
-------

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

3945.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. David M. John**

Mailing Address 15 Thankful Bradley Road

City  
West ReddingState  
CTZip Code  
06896Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2011

**Transaction ID : SB21B.37726**

Amount of Each Disbursement this Period

1937.50
---------

Full Name (Last, First, Middle Initial)

**B. David M. John**

Mailing Address 15 Thankful Bradley Road

City  
West ReddingState  
CTZip Code  
06896Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2011

**Transaction ID : SB21B.37834**

Amount of Each Disbursement this Period

1937.50
---------

Full Name (Last, First, Middle Initial)

**C. JPMS Cox, PLLC**Mailing Address 11300 Cantrell Road  
Suite 301City  
Little RockState  
ARZip Code  
72212Purpose of Disbursement  
Accounting & Compliance Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2011

**Transaction ID : SB21B.4129**

Amount of Each Disbursement this Period

6000.00
---------

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

9875.00
---------

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

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. JPMS Cox, PLLC**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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2011

**Transaction ID : SB21B.4206**

Amount of Each Disbursement this Period

6000.00
---------

Full Name (Last, First, Middle Initial)

**B. JPMS Cox, PLLC**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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2011

**Transaction ID : SB21B.4261**

Amount of Each Disbursement this Period

6000.00
---------

Full Name (Last, First, Middle Initial)

**C. JPMS Cox, PLLC**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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2011

**Transaction ID : SB21B.4325**

Amount of Each Disbursement this Period

6000.00
---------

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

18000.00
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**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. JPMS Cox, PLLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2011

Mailing Address 11300 Cantrell Road  
Suite 301

City Little Rock State AR Zip Code 72212

Purpose of Disbursement  
Accounting & Compliance Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4451**

Amount of Each Disbursement this Period

6000.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. LCM Strategies**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2011

Mailing Address 3409 Hopkins Street

City Nashville State TN Zip Code 37215

Purpose of Disbursement  
Direct Mail - PAC Fundraising

Candidate Name

Category/  
Type**Transaction ID : SB21B.4156**

Amount of Each Disbursement this Period

4500.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. LCM Strategies**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2011

Mailing Address 3409 Hopkins Street

City Nashville State TN Zip Code 37215

Purpose of Disbursement  
Direct Mail - PAC Fundraising

Candidate Name

Category/  
Type**Transaction ID : SB21B.4208**

Amount of Each Disbursement this Period

4500.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

15000.00
----------

<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

HUCK PAC

### A. LCM Strategies

Mailing Address 3409 Hopkins Street

City	State	Zip Code
Nashville	TN	37215

Purpose of Disbursement
Direct Mail - PAC Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4256

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

## B. LCM Strategies

Mailing Address 3409 Hopkins Street

City	State	Zip Code
Nashville	TN	37215

Purpose of Disbursement
Direct Mail - PAC Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4329

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

### C. LCM Strategies

Mailing Address 3409 Hopkins Street

City	State	Zip Code
Nashville	TN	37215

Purpose of Disbursement	
Direct Mail - PAC Fundraising	

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) ▼		

Date of Disbursement

Transaction ID : SB21B.4450

Amount of Each Disbursement this Period

4500.00

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

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

13500.00

<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

HUCK PAC

4500.00

State:  District:

MM / DD / YYYY

3500.00

State:  District:

500.00

State:  District:

8500.00

[illegible]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Chris Maiorana**

Mailing Address 9910 Longhorn Skyway

City Dripping Springs      State TX      Zip Code 78620

Purpose of Disbursement  
Reimbursement - Domain Renewal

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2011
**Transaction ID : SB21B.4365**

Amount of Each Disbursement this Period

34.99

Full Name (Last, First, Middle Initial)

**B. Chris Maiorana**

Mailing Address 9910 Longhorn Skyway

City Dripping Springs      State TX      Zip Code 78620

Purpose of Disbursement  
Reimbursement - Website Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2011
**Transaction ID : SB21B.4366**

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

**C. Chris Maiorana**

Mailing Address 9910 Longhorn Skyway

City Dripping Springs      State TX      Zip Code 78620

Purpose of Disbursement  
Reimbursement - Renewal of Web Address

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 08 / 2011
**Transaction ID : SB21B.4367**

Amount of Each Disbursement this Period

34.99

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

89.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. MDS Communications Corp.**

Mailing Address 545 W. Juanita Ave

City	State	Zip Code
Mesa	AZ	85210

Purpose of Disbursement  
Fundraising Expense - Telephone Calls

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2011

**Transaction ID : SB21B.37684**

Amount of Each Disbursement this Period

3556.80
---------

Full Name (Last, First, Middle Initial)

**B. MDS Communications Corp.**

Mailing Address 545 W. Juanita Ave

City	State	Zip Code
Mesa	AZ	85210

Purpose of Disbursement  
Fundraising Expense - Telephone Calls

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2011

**Transaction ID : SB21B.37711**

Amount of Each Disbursement this Period

1045.53
---------

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**Mailing Address 12921 Cantrell Road  
Suite 100

City	State	Zip Code
Little Rock	AR	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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2011

**Transaction ID : SB21B.4356**

Amount of Each Disbursement this Period

1334.80
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5937.13
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2011

**Transaction ID : SB21B.4166**

Amount of Each Disbursement this Period

105.63
--------

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2011

**Transaction ID : SB21B.4169**

Amount of Each Disbursement this Period

190.51
--------

Full Name (Last, First, Middle Initial)

**C. 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: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2011

**Transaction ID : SB21B.4170**

Amount of Each Disbursement this Period

21.01
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

317.15
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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

HUCK PAC

**A. Paychex, Inc.**

Date of Disbursement

Mailing Address 12921 Cantrell Road  
Suite 100

City	State	Zip Code
Little Rock	AR	72223

Transaction ID : SB21B.4192

Purpose of Disbursement	Payroll Processing Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

85.51

Full Name (Last, First, Middle Initial)

### B. Paychex, Inc.

Date of Disbursement

Mailing Address 12921 Cantrell Road  
Suite 100

The image shows three 16x16 LED displays arranged horizontally, separated by slashes. Each display is controlled by a 4-bit BCD-to-7-segment decoder. The first display shows '01', the second shows '31', and the third shows '2011'. The digits are formed by lighting specific segments of the 16x16 grid.

City	State	Zip Code
Little Rock	AR	72223

Transaction ID : SB21B.4193

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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) ▼		

Satisfaction Level	Percentage
Very satisfied	105.63
Not very satisfied	0

Full Name (Last, First, Middle Initial)

### C. Paychex, Inc.

Date of Disbursement

Mailing Address 12921 Cantrell Road  
Suite 100

City	State	Zip Code
Little Rock	AR	72223

Transaction ID : SB21B.4357

Purpose of Disbursement	Payroll Taxes
-------------------------	---------------

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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) ▼		

1150.50

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

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

1341.64

A diagram of a rectangular frame structure. It consists of 12 vertical members and 2 horizontal members (top and bottom). The members are connected at their ends. A cross-section of one of the vertical members is shown, indicating its width and the location of the top and bottom flanges.









**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 159 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2011

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock      State AR      Zip Code 72223

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type**Transaction ID : SB21B.4397**

Amount of Each Disbursement this Period

740.59
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2011

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock      State AR      Zip Code 72223

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Category/  
Type**Transaction ID : SB21B.4412**

Amount of Each Disbursement this Period

81.49
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2011

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock      State AR      Zip Code 72223

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Category/  
Type**Transaction ID : SB21B.4417**

Amount of Each Disbursement this Period

70.33
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

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

892.41
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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

HUCK PAC

### A. Paychex, Inc.

Category/  
Type

518.30

State:  District:

### B. Paychex, Inc.

MM / DD / YYYY

Category/  
Type

83.92

State:  District:

### C. Paychex, Inc.

Category/  
Type

83.92

State:  District:

686.14

[illegible]







# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 01 / 19 / 2011

**Transaction ID : SB21B.4167**

Amount of Each Disbursement this Period

0.35

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 01 / 20 / 2011

**Transaction ID : SB21B.4168**

Amount of Each Disbursement this Period

-0.01

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 01 / 21 / 2011

**Transaction ID : SB21B.4174**

Amount of Each Disbursement this Period

9.40

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

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

9.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 22 2011**Transaction ID : SB21B.4175**

Amount of Each Disbursement this Period

17.20

Full Name (Last, First, Middle Initial)

**B. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 23 2011**Transaction ID : SB21B.4176**

Amount of Each Disbursement this Period

9.94

Full Name (Last, First, Middle Initial)

**C. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 24 2011**Transaction ID : SB21B.4177**

Amount of Each Disbursement this Period

9.01

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

36.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4178**

Amount of Each Disbursement this Period

13.57
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4179**

Amount of Each Disbursement this Period

3.65
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4181**

Amount of Each Disbursement this Period

6.32
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

23.54
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**TOTAL** This Period (last page this line number only)..... ►

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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

HUCK PAC

State:  District:

MM / DD / YYYY

47.58

State:  District:

The image shows three 3x3 grids, each representing a number in a binary-like system. The first grid shows '01' with 'M' in the top-left and top-right cells. The second grid shows '30' with 'D' in the top-left and top-right cells. The third grid shows '2011' with 'Y' in the top-left, top-right, middle-right, and bottom-right cells. The numbers are displayed in the center of each grid.

23.75

State:  District:

Government	Percentage
Current government	96.48

<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

HUCK PAC

Category/  
Type

3.45

State:  District:

M M / D D / Y Y Y Y  
02 01 2011

Category/  
Type

7.89

State:  District:

Category/  
Type

4.63

State:  District:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4196**

Amount of Each Disbursement this Period

1.42
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4197**

Amount of Each Disbursement this Period

8.80
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4202**

Amount of Each Disbursement this Period

9.49
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

19.71
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2011

**Transaction ID : SB21B.4211**

Amount of Each Disbursement this Period

32.72
-------

Full Name (Last, First, Middle Initial)

**B. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2011

**Transaction ID : SB21B.4212**

Amount of Each Disbursement this Period

129.60
--------

Full Name (Last, First, Middle Initial)

**C. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2011

**Transaction ID : SB21B.4213**

Amount of Each Disbursement this Period

102.95
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

265.27
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4217**

Amount of Each Disbursement this Period

77.91
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4222**

Amount of Each Disbursement this Period

60.17
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4225**

Amount of Each Disbursement this Period

20.54
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

158.62
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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)

PAGE 173 OF 239

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2011

**Transaction ID : SB21B.4226**

Amount of Each Disbursement this Period

11.97

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2011

**Transaction ID : SB21B.4229**

Amount of Each Disbursement this Period

8.89

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2011

**Transaction ID : SB21B.4230**

Amount of Each Disbursement this Period

5.34

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

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

26.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 174 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4231**

Amount of Each Disbursement this Period

37.90
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4232**

Amount of Each Disbursement this Period

51.48
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4233**

Amount of Each Disbursement this Period

56.84
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

146.22
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 175 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4234**

Amount of Each Disbursement this Period

98.20
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4235**

Amount of Each Disbursement this Period

75.80
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4237**

Amount of Each Disbursement this Period

28.93
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

202.93
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4238**

Amount of Each Disbursement this Period

9.68
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4239**

Amount of Each Disbursement this Period

51.40
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4245**

Amount of Each Disbursement this Period

60.38
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

121.46
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2011

**Transaction ID : SB21B.4247**

Amount of Each Disbursement this Period

19.33
-------

Full Name (Last, First, Middle Initial)

**B. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2011

**Transaction ID : SB21B.4248**

Amount of Each Disbursement this Period

134.02
--------

Full Name (Last, First, Middle Initial)

**C. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2011

**Transaction ID : SB21B.4252**

Amount of Each Disbursement this Period

397.03
--------

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

550.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4253**

Amount of Each Disbursement this Period

33.80
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4254**

Amount of Each Disbursement this Period

19.78
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4255**

Amount of Each Disbursement this Period

34.32
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

87.90
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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)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 08 / 2011

**Transaction ID : SB21B.4260**

Amount of Each Disbursement this Period

36.66

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 09 / 2011

**Transaction ID : SB21B.4263**

Amount of Each Disbursement this Period

34.77

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2011

**Transaction ID : SB21B.4264**

Amount of Each Disbursement this Period

20.60

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

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

92.03



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4272**

Amount of Each Disbursement this Period

42.17
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4273**

Amount of Each Disbursement this Period

16.70
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4279**

Amount of Each Disbursement this Period

56.90
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

115.77
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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)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City State Zip Code  
Chicago IL 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 19 2011

**Transaction ID : SB21B.4289**

Amount of Each Disbursement this Period

12.75

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City State Zip Code  
Chicago IL 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 20 2011

**Transaction ID : SB21B.4290**

Amount of Each Disbursement this Period

7.42

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City State Zip Code  
Chicago IL 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 21 2011

**Transaction ID : SB21B.4291**

Amount of Each Disbursement this Period

15.00

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

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

35.17

<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

HUCK PAC

Category/  
Type

29.41

State:  District:

MM / DD / YYYY

Category/  
Type

35.19

State:  District:

Category/  
Type

260.74

State:  District:

325.34



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 25 2011**Transaction ID : SB21B.4295**

Amount of Each Disbursement this Period

74.35

Full Name (Last, First, Middle Initial)

**B. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 25 2011**Transaction ID : SB21B.37870**

Amount of Each Disbursement this Period

41.70

Full Name (Last, First, Middle Initial)

**C. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 26 2011**Transaction ID : SB21B.4300**

Amount of Each Disbursement this Period

19.34

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

135.39





# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2011

**Transaction ID : SB21B.4312**

Amount of Each Disbursement this Period

11.81

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2011

**Transaction ID : SB21B.4313**

Amount of Each Disbursement this Period

12.12

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2011

**Transaction ID : SB21B.4314**

Amount of Each Disbursement this Period

81.22

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

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

105.15

# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2011

**Transaction ID : SB21B.4316**

Amount of Each Disbursement this Period

203.65

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2011

**Transaction ID : SB21B.4317**

Amount of Each Disbursement this Period

165.90

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2011

**Transaction ID : SB21B.4318**

Amount of Each Disbursement this Period

91.22

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

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

460.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4324**

Amount of Each Disbursement this Period

194.50
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4333**

Amount of Each Disbursement this Period

38.41
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4334**

Amount of Each Disbursement this Period

55.68
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

288.59
--------

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

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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

HUCK PAC

Category/  
Type

66.12

State:  District:

Category/  
Type

28.19

State:  District:

Category/  
Type

11.45

State:  District:

Age Group	Percentage
18-24	105.76
25-34	105.76
35-44	105.76
45-54	105.76
55-64	105.76
65-74	105.76
75-84	105.76
85+	105.76

<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

HUCK PAC

Category/  
Type

7.37

State:  District:

04 / 15 / 2011

Category/  
Type

14.15

State:  District:

Category/  
Type

7.67

State:  District:

29.19

\_\_\_\_\_



# **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 193 OF 239

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2011

**Transaction ID : SB21B.4351**

Amount of Each Disbursement this Period

2.96

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2011

**Transaction ID : SB21B.4381**

Amount of Each Disbursement this Period

68.22

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2011

**Transaction ID : SB21B.4382**

Amount of Each Disbursement this Period

45.82

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

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

117.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4383**

Amount of Each Disbursement this Period

14.32
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4384**

Amount of Each Disbursement this Period

18.39
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4385**

Amount of Each Disbursement this Period

20.77
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

53.48
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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

HUCK PAC

Category/  
Type

12.30

State:  District:

Category/  
Type

15.22

State:  District:

Category/  
Type

9.39

State:  District:

36.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37871**

Amount of Each Disbursement this Period

20.00
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4390**

Amount of Each Disbursement this Period

5.46
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4391**

Amount of Each Disbursement this Period

247.44
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

272.90
--------

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 197 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2011**Transaction ID : SB21B.4393**

Amount of Each Disbursement this Period

32.84

Full Name (Last, First, Middle Initial)

**B. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2011**Transaction ID : SB21B.4411**

Amount of Each Disbursement this Period

9.40

Full Name (Last, First, Middle Initial)

**C. Paypal**Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2011**Transaction ID : SB21B.4414**

Amount of Each Disbursement this Period

222.58

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

264.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4415**

Amount of Each Disbursement this Period

61.60
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4416**

Amount of Each Disbursement this Period

52.34
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4418**

Amount of Each Disbursement this Period

89.11
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

203.05
--------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4419**

Amount of Each Disbursement this Period

9.74
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4421**

Amount of Each Disbursement this Period

26.09
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.4422**

Amount of Each Disbursement this Period

5.40
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

41.23
-------

**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)

PAGE 200 OF 239

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 07 2011

**Transaction ID : SB21B.4424**

Amount of Each Disbursement this Period

2.85

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 08 2011

**Transaction ID : SB21B.4425**

Amount of Each Disbursement this Period

8.54

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 09 2011

**Transaction ID : SB21B.4426**

Amount of Each Disbursement this Period

4.41

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

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

15.80





<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

HUCK PAC

Three digital displays showing the date in MM/DD/YYYY format: 05/13/2011.

Category/  
Type

38.53

State:  District:

05 / 14 / 2011

Category/  
Type

17.73

State:  District:

Category/  
Type

10.70

State:  District:

66.96

# **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 203 OF 239

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2011

**Transaction ID : SB21B.37807**

Amount of Each Disbursement this Period

3.24

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2011

**Transaction ID : SB21B.37808**

Amount of Each Disbursement this Period

2.22

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2011

**Transaction ID : SB21B.37809**

Amount of Each Disbursement this Period

4.68

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

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

10.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 204 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37810**

Amount of Each Disbursement this Period

23.57
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37811**

Amount of Each Disbursement this Period

33.97
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37812**

Amount of Each Disbursement this Period

20.03
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

77.57
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37813**

Amount of Each Disbursement this Period

14.70
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37814**

Amount of Each Disbursement this Period

8.35
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37815**

Amount of Each Disbursement this Period

15.42
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

38.47
-------



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37671**

Amount of Each Disbursement this Period

9.96
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37672**

Amount of Each Disbursement this Period

7.32
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37673**

Amount of Each Disbursement this Period

17.39
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

34.67
-------

**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)

PAGE 208 OF 239

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 31 2011

**Transaction ID : SB21B.37674**

Amount of Each Disbursement this Period

95.78

Full Name (Last, First, Middle Initial)

## **B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 01 2011

**Transaction ID : SB21B.37675**

Amount of Each Disbursement this Period

26.65

Full Name (Last, First, Middle Initial)

## **C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 02 2011

**Transaction ID : SB21B.37680**

Amount of Each Disbursement this Period

14.76

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

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

137.19



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 209 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37687**

Amount of Each Disbursement this Period

8.00
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37688**

Amount of Each Disbursement this Period

8.98
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37689**

Amount of Each Disbursement this Period

14.20
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

31.18
-------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 210 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37690**

Amount of Each Disbursement this Period

4.00
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37693**

Amount of Each Disbursement this Period

1.55
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37694**

Amount of Each Disbursement this Period

29.31
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

34.86
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 211 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37695**

Amount of Each Disbursement this Period

15.65
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37696**

Amount of Each Disbursement this Period

16.49
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37697**

Amount of Each Disbursement this Period

8.68
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

40.82
-------



<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

HUCK PAC

Category/  
Type

10.74

State:  District:

Category/  
Type

28.35

State:  District:

Category/  
Type

4.73

State:  District:

Percentage of students who did not pass the exam
43.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37705**

Amount of Each Disbursement this Period

2.16
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37706**

Amount of Each Disbursement this Period

5.61
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37820**

Amount of Each Disbursement this Period

1.52
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

9.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 215 OF 239

<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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37821**

Amount of Each Disbursement this Period

12.55
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37822**

Amount of Each Disbursement this Period

48.99
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37823**

Amount of Each Disbursement this Period

92.63
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

154.17
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37824**

Amount of Each Disbursement this Period

22.73
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37825**

Amount of Each Disbursement this Period

9.78
------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37826**

Amount of Each Disbursement this Period

-20.83
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

11.68
-------

**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 PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37827**

Amount of Each Disbursement this Period

89.43
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37828**

Amount of Each Disbursement this Period

94.84
-------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2011

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type**Transaction ID : SB21B.37829**

Amount of Each Disbursement this Period

114.89
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

299.16
--------

<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

HUCK PAC

### A. Paypal

Date of Disbursement

Mailing Address 4100 Solutions Center  
774100

City	State	Zip Code
Chicago	IL	60677

Transaction ID : SB21B.37830

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

242.41

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. Kristin Pelphrey**

Date of Disbursement

Mailing Address 5765 Bozeman  
No. 2201

City	State	Zip Code
Plano	TX	75024

Transaction ID : SB21B.4468

### Purpose of Disbursement

#### Consulting - Fundraising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

6078.82

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

C. Kristin Pelphrey

Date of Disbursement

Mailing Address 5765 Bozeman  
No. 2201

City	State	Zip Code
Plano	TX	75024

Transaction ID : SB21B.4470

### Purpose of Disbursement

#### Consulting - Fundraising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

450.00

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).....

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

6771.23



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. QualChoice**

Mailing Address 10825 Financial Centre Parkway

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Insurance Premiums

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      25      2011
**Transaction ID : SB21B.4236**

Amount of Each Disbursement this Period

161.73

Full Name (Last, First, Middle Initial)

**B. QualChoice**

Mailing Address 10825 Financial Centre Parkway

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Insurance Premiums

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      25      2011
**Transaction ID : SB21B.4296**

Amount of Each Disbursement this Period

161.73

Full Name (Last, First, Middle Initial)

**C. QualChoice**

Mailing Address 10825 Financial Centre Parkway

City Little Rock      State AR      Zip Code 72211

Purpose of Disbursement  
Insurance Premiums

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      27      2011
**Transaction ID : SB21B.4392**

Amount of Each Disbursement this Period

161.73

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

485.19

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. QualChoice**

Mailing Address 10825 Financial Centre Parkway

City	State	Zip Code
Little Rock	AR	72211

Purpose of Disbursement  
Insurance Premiums

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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2011

**Transaction ID : SB21B.4454**

Amount of Each Disbursement this Period

161.73
--------

Full Name (Last, First, Middle Initial)

**B. Safe Foods**

Mailing Address 4801 North Shore Drive

City	State	Zip Code
North Little Rock	AR	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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2011

**Transaction ID : SB21B.4198**

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**C. Safe Foods**

Mailing Address 4801 North Shore Drive

City	State	Zip Code
North Little Rock	AR	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) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2011

**Transaction ID : SB21B.4251**

Amount of Each Disbursement this Period

750.00
--------

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

1661.73

# **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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

## **A. 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: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 08 / 2011

**Transaction ID : SB21B.4330**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

## **B. 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: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2011

**Transaction ID : SB21B.4427**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

## **C. 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: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2011

**Transaction ID : SB21B.37681**

Amount of Each Disbursement this Period

750.00

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

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

2250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Security BankCard Center**

Mailing Address P.O. Box 6139

City Normans      State OK      Zip Code 73070

Purpose of Disbursement  
Credit Card Payment - See Memos

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      29      2011
**Transaction ID : SB21B.4374**

Amount of Each Disbursement this Period

314.55

Full Name (Last, First, Middle Initial)

**B. Security BankCard Center**

Mailing Address P.O. Box 6139

City Normans      State OK      Zip Code 73070

Purpose of Disbursement  
Credit Card Payment - See Memos

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      17      2011
**Transaction ID : SB21B.4375**

Amount of Each Disbursement this Period

328.59

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Dr.

City Framingham      State MA      Zip Code 01702

Purpose of Disbursement  
Office Expense - Supplies

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      17      2011
**Transaction ID : SB21B.4375.1**

Amount of Each Disbursement this Period

133.88

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

643.14





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Dish Network**

Mailing Address Department 0063

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Office Expense - Utilities

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 30 2011**Transaction ID : SB21B.4376.2**

Amount of Each Disbursement this Period

99.24

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Dr.

City Framingham State MA Zip Code 01702

Purpose of Disbursement  
Office Expense - Supplies

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 30 2011**Transaction ID : SB21B.4376.3**

Amount of Each Disbursement this Period

7.12

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock State AR Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 30 2011**Transaction ID : SB21B.4376.4**

Amount of Each Disbursement this Period

47.68

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock    State AR    Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2011
**Transaction ID : SB21B.4376.5**

Amount of Each Disbursement this Period

15.90

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth    State TX    Zip Code 76155

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2011
**Transaction ID : SB21B.4376.6**

Amount of Each Disbursement this Period

319.10

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth    State TX    Zip Code 76155

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2011
**Transaction ID : SB21B.4376.7**

Amount of Each Disbursement this Period

492.80

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2011

Mailing Address 600 E. Capitol Avenue

City	State	Zip Code
Little Rock	AR	72202

**Transaction ID : SB21B.4376.8**Purpose of Disbursement  
Postage - PAC Operations

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

12.40

**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2011

Mailing Address 500 Staples Dr.

City	State	Zip Code
Framingham	MA	01702

**Transaction ID : SB21B.4376.9**Purpose of Disbursement  
Office Expense - Supplies

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

31.03

**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2011

Mailing Address 1200 12th Ave. South  
Ste. 1200

City	State	Zip Code
Seattle	WA	98144-2734

**Transaction ID : SB21B.4376.11**Purpose of Disbursement  
Office Expense - Supplies

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

207.00

**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

<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

HUCK PAC

### A. Security BankCard Center

Date of Disbursement

Transaction ID : SB21B.37795

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

692.21

### B. US Post Office

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.37795.1

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	100
25-34	100
35-44	100
45-54	100
55-64	100
65-74	100
75-84	100
85+	4.95

**[MEMO ITEM]**

### C. US Post Office

Date of Disbursement

Transaction ID : SB21B.37795.5

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

52.90

**[MEMO ITEM]**

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

692.21

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 229 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Dish Network**

Mailing Address Department 0063

City Palatine State IL Zip Code 60055

Purpose of Disbursement  
Office Expense - Utilities

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 28 2011**Transaction ID : SB21B.37795.6**

Amount of Each Disbursement this Period

107.73

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock State AR Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 28 2011**Transaction ID : SB21B.37795.7**

Amount of Each Disbursement this Period

53.22

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Security BankCard Center**

Mailing Address P.O. Box 6139

City Norman State OK Zip Code 73070

Purpose of Disbursement  
Credit Card Payment - See Memos

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 11 2011**Transaction ID : SB21B.4439**

Amount of Each Disbursement this Period

2073.44

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

2073.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.0**

Amount of Each Disbursement this Period

186.69

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.1**

Amount of Each Disbursement this Period

2.38

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.3**

Amount of Each Disbursement this Period

179.82

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Dish Network**

Mailing Address Department 0063

City Palatine                      State IL                      Zip Code 60055

Purpose of Disbursement  
Office Expense - Utilities

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05                      11                      2011
**Transaction ID : SB21B.4439.4**

Amount of Each Disbursement this Period

107.73

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock                      State AR                      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05                      11                      2011
**Transaction ID : SB21B.4439.5**

Amount of Each Disbursement this Period

21.59

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Dr.

City Framingham                      State MA                      Zip Code 01702

Purpose of Disbursement  
Office Expense - Supplies

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05                      11                      2011
**Transaction ID : SB21B.4439.6**

Amount of Each Disbursement this Period

235.67

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.7**

Amount of Each Disbursement this Period

31.40

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Delta Air**

Mailing Address 1030 Delta Blvd.

City Atlanta      State GA      Zip Code 30320

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.8**

Amount of Each Disbursement this Period

225.40

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Delta Air**

Mailing Address 1030 Delta Blvd.

City Atlanta      State GA      Zip Code 30320

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.9**

Amount of Each Disbursement this Period

871.40

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 233 OF 239

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.10**

Amount of Each Disbursement this Period

11.51

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.11**

Amount of Each Disbursement this Period

54.40

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US Post Office**

Mailing Address 600 E. Capitol Avenue

City Little Rock      State AR      Zip Code 72202

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2011
**Transaction ID : SB21B.4439.12**

Amount of Each Disbursement this Period

7.04

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



<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

HUCK PAC

### A. Mack's Prairie Wings

Mailing Address 2335 Highway 63 North

City	State	Zip Code
Stuttgart	AR	72160

Purpose of Disbursement	Refund of Event Expense Incurred in 2010
-------------------------	--

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.37876.4

Amount of Each Disbursement this Period

-1961.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. Mack's Prairie Wings

Mailing Address 2335 Highway 63 North

City	State	Zip Code
Stuttgart	AR	72160

Purpose of Disbursement	Event Expense

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) ▼		

Date of Disbursement

Transaction ID : SB21B.37876.5

Amount of Each Disbursement this Period

261.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. Hertz Rent-a-Car

Mailing Address 3000 Aviation Way

City	State	Zip Code
Columbia	SC	29170

Purpose of Disbursement	Travel

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) ▼		

Date of Disbursement

Transaction ID : SB21B.37876.6

Amount of Each Disbursement this Period

1332.11

[MEMO ITEM]

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

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

0.00

<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

HUCK PAC

### A. Security BankCard Center

Date of Disbursement

Transaction ID : SB21B.37877

Amount of Each Disbursement this Period

Response	Percentage
U.S. should take more action to reduce global warming	172.63

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### B. US Post Office

Date of Disbursement

Mailing Address 600 E. Capitol Avenue

City	State	Zip Code
Little Rock	AR	72202

Transaction ID : SB21B.37877.0

Purpose of Disbursement	Postage - PAC Operations
-------------------------	--------------------------

Amount of Each Disbursement this Period

40.45

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### C. US Post Office

Date of Disbursement

Mailing Address 600 E. Capitol Avenue

City	State	Zip Code
Little Rock	AR	72202

Transaction ID : SB21B.37877.1

## Purpose of Disbursement

### Postage - PAC Operations

Amount of Each Disbursement this Period

22.95

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:

**[MEMO ITEM]**

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

Age Group	Percentage
18-24	17.26
25-34	17.26
35-44	17.26
45-54	17.26
55-64	17.26
65-74	17.26
75-84	17.26
85+	17.26

**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 PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. Dish Network**

Mailing Address Department 0063

City	State	Zip Code
Palatine	IL	60055

Purpose of Disbursement  
Office Expense-Utilities

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2011

**Transaction ID : SB21B.37877.2**

Amount of Each Disbursement this Period

107.73
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City	State	Zip Code
Little Rock	AR	72202

Purpose of Disbursement  
Postage - PAC Operations

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2011

**Transaction ID : SB21B.37877.3**

Amount of Each Disbursement this Period

1.50
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. TCPrint Solutions**

Mailing Address 4150 East 43rd Street

City	State	Zip Code
North Little Rock	AR	72117-2502

Purpose of Disbursement  
Office Expense - Printing

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2011

**Transaction ID : SB21B.4464**

Amount of Each Disbursement this Period

476.89
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

476.89
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address 600 E. Capitol Avenue

City  
Little RockState  
ARZip Code  
72202Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2011

**Transaction ID : SB21B.4268**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 600 E. Capitol Avenue

City  
Little RockState  
ARZip Code  
72202Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2011

**Transaction ID : SB21B.4286**

Amount of Each Disbursement this Period

70.00
-------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

570.00
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291189.87
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**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 239 OF 239

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**HUCK PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Holtzman Vogel, PLLC**Nature of Debt (Purpose):  
Consulting - LegalMailing Address 45 North Hill Drive  
Suite 100City State Zip Code  
Warrenton VA 20186

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.40673

Amount Incurred This Period

10170.00

Payment This Period

4816.25

Outstanding Balance at Close of This Period

5353.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

5353.75

2) **TOTALS** This Period (last page this line number only)..... ►

5353.75

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) ►

5353.75