

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

Office Use Only

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

Americans for Legal Immigration PAC

ADDRESS (number and street)

PO Box 30966

☐Check if different
than previously
reported. (ACC)

Raleigh

NC

27622

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00405878

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

12

31

2009

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

Type or Print Name of Treasurer

Ms Jane Patterson

Signature of Treasurer

Electronically Filed by Ms Jane Patterson

Date

04

14

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Best Effort information was updated for the following donors: Linda Pass, William Constable, Glen Irwin, Brian Vocca, and Gerald Bullock also made contributions in the first half of 2009. Lee, Kwang has recently changed addresses. He also contributed in June, July, Sept., Dec., 2007, March, 2008, Feb., March, June, July, 2009 John W. Gleeson also contributed in the first half of 2009. Amended to make corrections to an anonymous contribution entry.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 120

Write or Type Committee Name
Americans for Legal Immigration PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		-434.74
(b) Cash on Hand at Beginning of Reporting Period	1196.68	
(c) Total Receipts (from Line 19)	60273.29	118143.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61469.97	117708.88
7. Total Disbursements (from Line 31)	56171.61	112410.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5298.36	5298.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Americans for Legal Immigration PAC

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y W Y
2 0 0 9

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	19345.00	41027.00
(ii) Unitemized	40928.29	76916.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)	60273.29	117943.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	60273.29	117943.62
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	200.00
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	60273.29	118143.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	60273.29	118143.62

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	56171.61	112160.52	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	56171.61	112160.52	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	56171.61	112410.52	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56171.61	112410.52	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	60273.29	117943.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60273.29	117943.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56171.61	112160.52
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	200.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56171.61	111960.52

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

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

FOR LINE NUMBER: PAGE 7 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Michael Amos

Mailing Address 8455 Laurel Lakes Blvd.

City

Naples

State

FL

Zip Code

34119

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 ▼

3000.00

Date of Receipt

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

Transaction ID: SA11AI.13287

Amount of Each Receipt this Period

1000.00

C

B.

Full Name (Last, First, Middle Initial)

Michael Amos

Mailing Address 8455 Laurel Lakes Blvd.

City

Naples

State

FL

Zip Code

34119

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 ▼

4000.00

Date of Receipt

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

Transaction ID: SA11AI.13465

Amount of Each Receipt this Period

1000.00

C

C.

Full Name (Last, First, Middle Initial)

Ricky Anderson

Mailing Address 4321 Hamm Rd

City

Barboursville

State

VA

Zip Code

22923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northrop Grumman

Occupation
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
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12578

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

2100.00

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 8 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Ricky Anderson

Mailing Address 4321 Hamm Rd

City

Barboursville

State

VA

Zip Code

22923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northrop Grumman

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.13368

Amount of Each Receipt this Period

100.00

C

B.

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

Mailing Address Unknown

City

Unknown

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.13996

Amount of Each Receipt this Period

50.00

Money Gram Money Order

C.

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

Mailing Address Unknown

City

Unknown

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.14044

Amount of Each Receipt this Period

10.00

Cash (Deposit Correction
Requested)

SUBTOTAL of Receipts This Page (optional)

160.00

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 9 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Kathryn K. Bell

Mailing Address 669 Rockledge Ct

City

Frisco

State

TX

Zip Code

75034

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 ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12831

Amount of Each Receipt this Period

750.00

C

B.

Full Name (Last, First, Middle Initial)

Kathryn K. Bell

Mailing Address 669 Rockledge Ct

City

Frisco

State

TX

Zip Code

75034

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 ▼

3500.00

Date of Receipt

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

Transaction ID: SA11AI.13127

Amount of Each Receipt this Period

2250.00

C

C.

Full Name (Last, First, Middle Initial)

Stephen Bellotti

Mailing Address 1555 Alta Glen Dr, #3

City

San Jose

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jerome A Bellotti & Associates

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.13114

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

3100.00

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 10 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Stephen Bellotti

Mailing Address 1555 Alta Glen Dr, #3

City

San Jose

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jerome A Bellotti & Assoc-
iates

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.13543

Amount of Each Receipt this Period

100.00

C

B.

Full Name (Last, First, Middle Initial)

Bettie Blecke

Mailing Address 312 Byron Av

City

Bloomington

State

IL

Zip Code

60108

FEC ID number of contributing
federal political committee.

C

Name of Employer
BeeJay Management

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.13475

Amount of Each Receipt this Period

25.00

C

C.

Full Name (Last, First, Middle Initial)

John J. Bolling

Mailing Address 103 Pineda

City

Huntsville

State

AL

Zip Code

35811

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
1 1 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.13860

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13475**

Best Effort, full name and occupation requested.

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

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

FOR LINE NUMBER: PAGE 12 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Robert Bollinger

Mailing Address 1600 N San Fernando RD Apt 332

City State Zip Code
 Burbank CA 91504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Castellan Solutions

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.13081

Amount of Each Receipt this Period

150.00

C

B.

Full Name (Last, First, Middle Initial)

Lawrence Bordonaro

Mailing Address 5744 Tobias Ave

City State Zip Code
 Van Nuys CA 91411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fox Digital

Occupation
Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.12567

Amount of Each Receipt this Period

100.00

C

C.

Full Name (Last, First, Middle Initial)

Linda Bridwell

Mailing Address 10695 Loire Ave

City State Zip Code
 San Diego CA 92131

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.12561

Amount of Each Receipt this Period

100.00

CC

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13081**

Best Effort Requested middle name and occupation.

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

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

FOR LINE NUMBER: PAGE 14 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Linda Bridwell

Mailing Address 10695 Loire Ave

City

San Diego

State

CA

Zip Code

92131

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 ▼

425.00

Date of Receipt

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

Transaction ID: SA11AI.13270

Amount of Each Receipt this Period

150.00

C

B.

Full Name (Last, First, Middle Initial)

Gerald Bullock

Mailing Address 2508B W. Grace St

City

Richmond

State

VA

Zip Code

23220

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 ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.13954

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Jerry Chapman

Mailing Address po box 2189

City

atlantic beach

State

NC

Zip Code

28512

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
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12662

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13954**

Prior contribution in 2008 and first half of 2009

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

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

FOR LINE NUMBER: PAGE 16 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Jerry Chapman

Mailing Address po box 2189

City

atlantic beach

State

NC

Zip Code

28512

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.13177

Amount of Each Receipt this Period

50.00

C

B.

Full Name (Last, First, Middle Initial)

Marilyn Coddington

Mailing Address 11347 40th. Avenue

City

Allendale

State

MI

Zip Code

49401-9533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.12343

Amount of Each Receipt this Period

250.00

p

C.

Full Name (Last, First, Middle Initial)

Larry Coke

Mailing Address 17752 Johnson Rd

City

Pelkie

State

MI

Zip Code

49958

FEC ID number of contributing
federal political committee.

C

Name of Employer
Signature Research

Occupation
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12771

Amount of Each Receipt this Period

200.00

C

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12343**

Best Effort Requested middle name, employer and occupation.

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

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

FOR LINE NUMBER: PAGE 18 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Larry Coke

Mailing Address 17752 Johnson Rd

City

State

Zip Code

Pelkie

MI

49958

FEC ID number of contributing
federal political committee.

C

Name of Employer
Signature Research

Occupation
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.12225

Amount of Each Receipt this Period

75.00

p

B.

Full Name (Last, First, Middle Initial)

Larry Coke

Mailing Address 17752 Johnson Rd

City

State

Zip Code

Pelkie

MI

49958

FEC ID number of contributing
federal political committee.

C

Name of Employer
Signature Research

Occupation
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11AI.12291

Amount of Each Receipt this Period

100.00

p

C.

Full Name (Last, First, Middle Initial)

Larry Coke

Mailing Address 17752 Johnson Rd

City

State

Zip Code

Pelkie

MI

49958

FEC ID number of contributing
federal political committee.

C

Name of Employer
Signature Research

Occupation
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

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

Transaction ID: SA11AI.13526

Amount of Each Receipt this Period

200.00

C

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

William Constable

Mailing Address 2341 Palos Verdes Dr. West

City State Zip Code
 Palos Verdes Estat CA 90274

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fedex

Occupation
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.13609

Amount of Each Receipt this Period

25.00

C

B.

Full Name (Last, First, Middle Initial)

Bob Coolbaugh

Mailing Address 567 S. Arlington Rd.

City State Zip Code
 Orange CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coolbaugh Masonry, Inc.

Occupation
Masonry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12761

Amount of Each Receipt this Period

100.00

C

C.

Full Name (Last, First, Middle Initial)

Cecily Craft Dresser

Mailing Address 1242 W. Country Club Rd

City State Zip Code
 Crawfordsvilln IN 47933

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13724

Amount of Each Receipt this Period

40.00

k

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13609**

Updated Occupation

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13724**

Employer and occupation information requested

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

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

FOR LINE NUMBER: PAGE 21 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Rebecca Craig

Mailing Address 346 Weakley Creek Rd

City

Lawrenceburg

State

TN

Zip Code

38464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health South Rehabilitati-
on

Occupation
Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.13505

Amount of Each Receipt this Period

250.00

C

B.

Full Name (Last, First, Middle Initial)

Kathryn S Cromer

Mailing Address 4342 Provinceline Rd

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.12564

Amount of Each Receipt this Period

100.00

C

C.

Full Name (Last, First, Middle Initial)

Kathryn S Cromer

Mailing Address 4342 Provinceline Rd

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12841

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Kathryn S Cromer

Mailing Address 4342 Provinceline Rd

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.13035

Amount of Each Receipt this Period

100.00

C

B.

Full Name (Last, First, Middle Initial)

Kathryn S Cromer

Mailing Address 4342 Provinceline Rd

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.13198

Amount of Each Receipt this Period

300.00

C

C.

Full Name (Last, First, Middle Initial)

Robert Dietrich

Mailing Address 1312 Burbeck Ave

City

Richmond

State

CA

Zip Code

94801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12887

Amount of Each Receipt this Period

40.00

C

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Robert Dietrich

Mailing Address 1312 Burbeck Ave

City

Richmond

State

CA

Zip Code

94801

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 ▼

235.00

Date of Receipt

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

Transaction ID: SA11AI.12258

Amount of Each Receipt this Period

25.00

p

B.

Full Name (Last, First, Middle Initial)

Gordon Domes

Mailing Address 13895 Beck Rd

City

Dallas

State

OR

Zip Code

97338

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.13910

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Josie Falbo

Mailing Address 2847 S Buckingham

City

Westchester

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12624

Amount of Each Receipt this Period

50.00

C

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13910**

Request sent for employer and occupation, not included on card

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

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

FOR LINE NUMBER: PAGE 25 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Josie Falbo

Mailing Address 2847 S Buckingham

City

Westchester

State

IL

Zip Code

60154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.13384

Amount of Each Receipt this Period

50.00

C

B.

Full Name (Last, First, Middle Initial)

Kyle Ferguson

Mailing Address PO Box 780931

City

Dallas

State

TX

Zip Code

75378

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.13013

Amount of Each Receipt this Period

1000.00

C

C.

Full Name (Last, First, Middle Initial)

Joe Flaherty

Mailing Address 3316 Southern Cove

City

Cabot

State

AR

Zip Code

72023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: SA11AI.13244

Amount of Each Receipt this Period

50.00

C

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

James Frazier

Mailing Address 1712 Black Oak

City

Lafayette

State

IN

Zip Code

47905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13683

Amount of Each Receipt this Period

100.00

k

B.

Full Name (Last, First, Middle Initial)

James GARBUTT

Mailing Address 541 Prospect Avenue

City

Hackensack

State

NJ

Zip Code

07601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Plumber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12774

Amount of Each Receipt this Period

300.00

C

C.

Full Name (Last, First, Middle Initial)

John W. Gleeson

Mailing Address 7626 South Shenandoah Dr.

City

Elizabeth

State

CO

Zip Code

80107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Qwest Comm

Occupation
Computer Systems Engineer, Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.12216

Amount of Each Receipt this Period

50.00

p

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13683**

Best effort, letter sent. Requested middle name, employer and occupation

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12216**

Best Effort Requested name and occupation.

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

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

FOR LINE NUMBER: PAGE 28 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

John W. Gleeson

Mailing Address 7626 South Shenandoah Dr.

City

Elizabeth

State

CO

Zip Code

80107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Qwest Comm

Occupation

Computer Systems Engineer, Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.12296

Amount of Each Receipt this Period

50.00

p

B.

Full Name (Last, First, Middle Initial)

John W. Gleeson

Mailing Address 7626 South Shenandoah Dr.

City

Elizabeth

State

CO

Zip Code

80107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Qwest Comm

Occupation

Computer Systems Engineer, Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.12389

Amount of Each Receipt this Period

50.00

p

C.

Full Name (Last, First, Middle Initial)

Charles Goodno

Mailing Address P.O. Box 2463

City

Chapel Hill

State

NC

Zip Code

27515-2463

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASDF

Occupation

Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.13429

Amount of Each Receipt this Period

200.00

C

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13429**

Best Effort request sent for occupation.

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

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

FOR LINE NUMBER: PAGE 30 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

G. Louis Graziadio, III

Mailing Address 149 Palos Verdes Blvd Ste G

City

Redondon Beach

State

CA

Zip Code

90277

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.13956

Amount of Each Receipt this Period

250.00

k

B.

Full Name (Last, First, Middle Initial)

Rick Guynn

Mailing Address 200 fiddlers knoll ct.

City

Kernersville

State

NC

Zip Code

27284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starr Ele. Inc

Occupation
Helpdesk Admin.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.12113

Amount of Each Receipt this Period

100.00

p

C.

Full Name (Last, First, Middle Initial)

Rick Guynn

Mailing Address 200 fiddlers knoll ct.

City

Kernersville

State

NC

Zip Code

27284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starr Ele. Inc

Occupation
Helpdesk Admin.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.12295

Amount of Each Receipt this Period

50.00

p

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13956**

Best Effort Letter sent requesting first name, employer and occupation.

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

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

FOR LINE NUMBER: PAGE 32 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Rick Guynn

Mailing Address 200 fiddlers knoll ct.

City

Kernersville

State

NC

Zip Code

27284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starr Ele. Inc

Occupation

Helpdesk Admin.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.12329

Amount of Each Receipt this Period

50.00

p

B.

Full Name (Last, First, Middle Initial)

Hessie Harris

Mailing Address 12901 Blue Lane

City

Silver Springs

State

MD

Zip Code

20906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Compliance, Inc.

Occupation

General Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.13073

Amount of Each Receipt this Period

500.00

C

C.

Full Name (Last, First, Middle Initial)

Leslie Hay

Mailing Address PO Box 11225

City

Montgomery

State

AL

Zip Code

36111

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of AL

Occupation

IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12849

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 120

(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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Leslie Hay

Mailing Address PO Box 11225

City

Montgomery

State

AL

Zip Code

36111

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of ALOccupation
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

Transaction ID: SA11AI.13589

Amount of Each Receipt this Period

100.00

C

B.

Full Name (Last, First, Middle Initial)

Gary Hilyer

Mailing Address 6600 West Warner

City

Huntington Beach

State

CA

Zip Code

92647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best EffortOccupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: SA11AI.13979

Amount of Each Receipt this Period

300.00

Citibank Money Order

C.

Full Name (Last, First, Middle Initial)

Jerry C. Houchens

Mailing Address 2428 N. Valencia Ave.

City

Santa Ana

State

CA

Zip Code

92706

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.12235

Amount of Each Receipt this Period

50.00

p

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13979**

Purchase signature looks like N. G. M. We have no other information about this contribution.

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12235**

Middle name requested.

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

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

FOR LINE NUMBER: PAGE 35 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Jerry C. Houchens

Mailing Address 2428 N. Valencia Ave.

City

Santa Ana

State

CA

Zip Code

92706

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
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.12367

Amount of Each Receipt this Period

25.00

p

B.

Full Name (Last, First, Middle Initial)

Jerry C. Houchens

Mailing Address 2428 N. Valencia Ave.

City

Santa Ana

State

CA

Zip Code

92706

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.12418

Amount of Each Receipt this Period

30.00

p

C.

Full Name (Last, First, Middle Initial)

Glen I. Irwin

Mailing Address 6830 Elmrich Ct.

City

Anchorage

State

AK

Zip Code

99504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12028

Amount of Each Receipt this Period

100.00

p

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12367**

Requested middle name.

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12028**

Best Effort middle name added. Glen Irwin also contributed in the first half of 2009.

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

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

FOR LINE NUMBER: PAGE 37 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Glen I. Irwin

Mailing Address 6830 Elmrich Ct.

City

Anchorage

State

AK

Zip Code

99504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.12239

Amount of Each Receipt this Period

100.00

p

B.

Full Name (Last, First, Middle Initial)

Glen I. Irwin

Mailing Address 6830 Elmrich Ct.

City

Anchorage

State

AK

Zip Code

99504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.12270

Amount of Each Receipt this Period

50.00

p

C.

Full Name (Last, First, Middle Initial)

Faye Joseph

Mailing Address 211 Glasgow Rd

City

Cary

State

NC

Zip Code

27311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13691

Amount of Each Receipt this Period

2000.00

k

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13691**

Best effort letter sent requesting information.

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

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

FOR LINE NUMBER: PAGE 39 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Gayle Kesselman

Mailing Address 519 Hackensack St

City

Carlstadt

State

NJ

Zip Code

07072

FEC ID number of contributing
federal political committee.

C

Name of Employer
UMDNJ

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.12978

Amount of Each Receipt this Period

250.00

C

B.

Full Name (Last, First, Middle Initial)

Gayle Kesselman

Mailing Address 519 Hackensack St

City

Carlstadt

State

NJ

Zip Code

07072

FEC ID number of contributing
federal political committee.

C

Name of Employer
UMDNJ

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

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

Transaction ID: SA11AI.13445

Amount of Each Receipt this Period

100.00

C

C.

Full Name (Last, First, Middle Initial)

Walter Kleiner

Mailing Address 1725 89th Place NE

City

Clude Hill

State

WA

Zip Code

98004

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
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13727

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Walter Kleiner

Mailing Address 1725 89th Place NE

City

Clude Hill

State

WA

Zip Code

98004

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
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.13915

Amount of Each Receipt this Period

100.00

k

B.

Full Name (Last, First, Middle Initial)

Phyllis Klopf

Mailing Address 508 W. Cortner St.

City

Hanford

State

CA

Zip Code

93230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort Declined to
Answer

Occupation
Best Effort Declined to Answer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.13041

Amount of Each Receipt this Period

50.00

C

C.

Full Name (Last, First, Middle Initial)

Kwang S. Lee

Mailing Address 4 Greenridge Forest Ct

City

Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Medical Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13687

Amount of Each Receipt this Period

300.00

k

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13041**

Full name, employer and occupation requested.

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

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

FOR LINE NUMBER: PAGE 42 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Kwang S. Lee

Mailing Address 4 Greenridge Forest Ct

City

Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Medical Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: SA11AI.13919

Amount of Each Receipt this Period

300.00

k

B.

Full Name (Last, First, Middle Initial)

Mark Lewis

Mailing Address 4187 Columbia Road

City

North Olmsted

State

OH

Zip Code

44070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation

Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.13562

Amount of Each Receipt this Period

250.00

C

C.

Full Name (Last, First, Middle Initial)

Laurie Maines

Mailing Address 218123 Eagle Peak Ave.

City

Santa Clarita

State

CA

Zip Code

91387

FEC ID number of contributing
federal political committee.

C

Name of Employer
Engineered Lighting Produ-
cts

Occupation

Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.12938

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13919**

Lee, Kwang has recently changed address from Neederland, TX. He also contributed in June, July, Sept., Dec., 2007, March, 2008, Feb., March, June, July, 2009

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13562**

Best Effort Requested Employer and Occupation

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

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

FOR LINE NUMBER: PAGE 44 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Laurie Maines

Mailing Address 218123 Eagle Peak Ave.

City

Santa Clarita

State

CA

Zip Code

91387

FEC ID number of contributing
federal political committee.

C

Name of Employer
Engineered Lighting Produ-
cts

Occupation
Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.13301

Amount of Each Receipt this Period

200.00

C

B.

Full Name (Last, First, Middle Initial)

Charles Matson

Mailing Address 914 East C Street

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPRR

Occupation
Railroad

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

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

Transaction ID: SA11AI.13426

Amount of Each Receipt this Period

25.00

C

C.

Full Name (Last, First, Middle Initial)

Charles Matson

Mailing Address 914 East C Street

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPRR

Occupation
Railroad

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.13537

Amount of Each Receipt this Period

25.00

C

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Robert Meyendorf

Mailing Address 337 Firwood Dr. Apt. A

City State Zip Code
 Dayton OH 45419

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Dayton

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.13283

Amount of Each Receipt this Period

150.00

C

B.

Full Name (Last, First, Middle Initial)

Sharon M. Owen

Mailing Address 2622 S Kingston Ct

City State Zip Code
 Aurora CO 80014-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.13172

Amount of Each Receipt this Period

50.00

C

C.

Full Name (Last, First, Middle Initial)

Sharon M. Owen

Mailing Address 2622 S Kingston Ct

City State Zip Code
 Aurora CO 80014-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.13934

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13283**

Best Effort Requested middle name and occupation.

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13172**

Best Effort Requested Employer and Occupation

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

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

FOR LINE NUMBER: PAGE 47 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Sharon M. Owen

Mailing Address 2622 S Kingston Ct

City

Aurora

State

CO

Zip Code

80014-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.14000

Amount of Each Receipt this Period

50.00

k

B.

Full Name (Last, First, Middle Initial)

Linda Pass

Mailing Address P O Box 7965

City

Athens

State

GA

Zip Code

30604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Semi-Retired Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.13298

Amount of Each Receipt this Period

75.00

C

C.

Full Name (Last, First, Middle Initial)

Judy H. Patterson

Mailing Address 117 Heliport Dr

City

Rutherfordton

State

NC

Zip Code

28139

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
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.13958

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13298**

Linda Pass also made previous contributions in the first half of 2009.

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

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

FOR LINE NUMBER: PAGE 49 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Dennis Peinsipp

Mailing Address Green Turtle Cay

City

State

Zip Code

Abaco Bahamas

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13713

Amount of Each Receipt this Period

100.00

k

B.

Full Name (Last, First, Middle Initial)

Richard D. Reamer

Mailing Address 1902 Ardenwood Ter

City

State

Zip Code

Crofton

MD

21114-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Service Power

Occupation
Computer Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13740

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Richard D. Reamer

Mailing Address 1902 Ardenwood Ter

City

State

Zip Code

Crofton

MD

21114-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Service Power

Occupation
Computer Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.13809

Amount of Each Receipt this Period

50.00

k

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13713**

Address is complete, no state or zip. Best Effort Letter sent requesting additional information.
Could not be reached by phone number provided.

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

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

FOR LINE NUMBER: PAGE 51 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Richard D. Reamer

Mailing Address 1902 Ardenwood Ter

City

Crofton

State

MD

Zip Code

21114-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Service Power

Occupation

Computer Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

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

Transaction ID: SA11AI.13854

Amount of Each Receipt this Period

75.00

k

B.

Full Name (Last, First, Middle Initial)

Richard D. Reamer

Mailing Address 1902 Ardenwood Ter

City

Crofton

State

MD

Zip Code

21114-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Service Power

Occupation

Computer Software

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

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

Transaction ID: SA11AI.13869

Amount of Each Receipt this Period

50.00

k

C.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13718

Amount of Each Receipt this Period

200.00

k

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13718**

Best Effort sent request for employer and occupation.

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

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

FOR LINE NUMBER: PAGE 53 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13753

Amount of Each Receipt this Period

200.00

k

B.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: SA11AI.13851

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: SA11AI.13884

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.14006

Amount of Each Receipt this Period

100.00

k

B.

Full Name (Last, First, Middle Initial)

Helen Reske

Mailing Address 845 S. Pendleton Ave

City

Pendleton

State

IN

Zip Code

46064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.14007

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Brian Richardson

Mailing Address 1718 Port Barmouth Pl

City

Newport Beach

State

CA

Zip Code

92660-5313

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
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12836

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 55 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Norman Rogers

Mailing Address 2627 S Bayshore Dr Apt 1204

City

Miami

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Effort

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.13010

Amount of Each Receipt this Period

500.00

C

B.

Full Name (Last, First, Middle Initial)

Reva Rohe

Mailing Address 15509 Mauna Loa Lane

City

Houston

State

TX

Zip Code

77040

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
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13434

Amount of Each Receipt this Period

100.00

C

C.

Full Name (Last, First, Middle Initial)

Steven Ruff

Mailing Address 6435 Dehesa Road

City

El Cajon

State

CA

Zip Code

92019

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
0 7 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.12863

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13010**

Best Effort Request for employer and occupation sent.

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13434**

Best Effort Requested middle name.

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12863**

Best Effort Request for middle name sent and occupation

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

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

FOR LINE NUMBER: PAGE 58 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Ingrid Schneider

Mailing Address 1420 Steverly Ave

City

Long Beach

State

CA

Zip Code

90815

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
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.13931

Amount of Each Receipt this Period

50.00

k

B.

Full Name (Last, First, Middle Initial)

Ingrid Schneider

Mailing Address 1420 Steverly Ave

City

Long Beach

State

CA

Zip Code

90815

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
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.13962

Amount of Each Receipt this Period

50.00

k

C.

Full Name (Last, First, Middle Initial)

Ingrid Schneider

Mailing Address 1420 Steverly Ave

City

Long Beach

State

CA

Zip Code

90815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.13963

Amount of Each Receipt this Period

25.00

k

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen Schwartzman

Mailing Address 19223 Index St
Unit 1

City State Zip Code
Northridge CA 91326

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.13302

Amount of Each Receipt this Period

50.00

C

B.

Full Name (Last, First, Middle Initial)
Jane Shafer

Mailing Address 634 Blossom Ln

City State Zip Code
Lincoln CA 95648

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
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.13159

Amount of Each Receipt this Period

50.00

C

C.

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

Mailing Address PO Box 55

City State Zip Code
Paoli IN 47454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lancer

Occupation
Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.13723

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 60 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

James R. Snow

Mailing Address 16538 redwood circle

City

fountain valley

State

CA

Zip Code

92708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boeing

Occupation
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
1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.13385

Amount of Each Receipt this Period

100.00

C

B.

Full Name (Last, First, Middle Initial)

Brian Vocca

Mailing Address 1210 Beach Dr

City

Seaside

State

OR

Zip Code

97138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Computer Systems 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
1 1 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.13887

Amount of Each Receipt this Period

100.00

k

C.

Full Name (Last, First, Middle Initial)

Charles B. Woods

Mailing Address 228 Lewis Tate Rd

City

Meridianville

State

AL

Zip Code

35759

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
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.12612

Amount of Each Receipt this Period

100.00

C

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13385**

Best Effort Requested Occupation and middle name.

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13887**

Previous contribution in April 2009

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.12612**

Best Effort Middle name, employer and occupation requested

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

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

FOR LINE NUMBER: PAGE 63 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Charles Woodul

Mailing Address 709 Villa Antigua Ct

City

El Paso

State

TX

Zip Code

79932

FEC ID number of contributing
federal political committee.

C

Name of Employer
El Paso ISD

Occupation
Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.13622

Amount of Each Receipt this Period

200.00

C

B.

Full Name (Last, First, Middle Initial)

Robert Yearly

Mailing Address 1211 Honey Lake St

City

Las Vegas

State

NV

Zip Code

89110

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
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.13181

Amount of Each Receipt this Period

25.00

C

C.

Full Name (Last, First, Middle Initial)

Robert Yearly

Mailing Address 1211 Honey Lake St

City

Las Vegas

State

NV

Zip Code

89110

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
1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.13353

Amount of Each Receipt this Period

50.00

C

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.13622**

Best Effort Requested middle name and occupation

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 120

(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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Newton W. Young

Mailing Address 22637 Hickory Ave

City

Torrance

State

CA

Zip Code

90505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11Al.13905

Amount of Each Receipt this Period

100.00

k

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

19345.00

**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 66 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. LauderdaleState
FLZip Code
33336Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11930

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

Amount of Each Disbursement this Period

122.04

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. LauderdaleState
FLZip Code
33336Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12502

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Amount of Each Disbursement this Period

4.95

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. LauderdaleState
FLZip Code
33336Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12510

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	9

Amount of Each Disbursement this Period

5.04

SUBTOTAL of Disbursements This Page (optional)

132.03

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. Lauderdale

State
FL

Zip Code
33336

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12537

Date of Disbursement

12 / 01 / 2009

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. Lauderdale

State
FL

Zip Code
33336

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12541

Date of Disbursement

12 / 03 / 2009

Amount of Each Disbursement this Period

28.60

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 36001

City
Ft. Lauderdale

State
FL

Zip Code
33336

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12556

Date of Disbursement

12 / 30 / 2009

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

38.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 68 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City American Fork State VT Zip Code 84003

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11911

Date of Disbursement

07 / 03 / 2009

Amount of Each Disbursement this Period

43.50

B.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City American Fork State VT Zip Code 84003

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11935

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

60.05

C.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City American Fork State VT Zip Code 84003

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12455

Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

40.10

SUBTOTAL of Disbursements This Page (optional)

143.65

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 69 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City
American ForkState
VTZip Code
84003Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12477

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	9

Amount of Each Disbursement this Period

40.40

B.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City
American ForkState
VTZip Code
84003Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12509

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	9

Amount of Each Disbursement this Period

46.35

C.

Full Name (Last, First, Middle Initial)

Authorize Net Corporation

Mailing Address 915 S. 500 E. Ste. 200

City
American ForkState
VTZip Code
84003Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12540

Date of Disbursement

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

Amount of Each Disbursement this Period

52.15

SUBTOTAL of Disbursements This Page (optional)

138.90

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Best Buy

Mailing Address P.O. Box 9312
1-888-BEST BUY (1-888-237-8289)

City Minneapolis State MN Zip Code 55440

Purpose of Disbursement
Office supplies and equipment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12530

Date of Disbursement

11 / 20 / 2009

Amount of Each Disbursement this Period

221.93

B.

Full Name (Last, First, Middle Initial)

Branch Banking and Trust

Mailing Address 200 West Second Street

City Winston-Salem State NC Zip Code 27101

Purpose of Disbursement
Service Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11919

Date of Disbursement

07 / 08 / 2009

Amount of Each Disbursement this Period

105.00

C.

Full Name (Last, First, Middle Initial)

Branch Banking and Trust

Mailing Address 200 West Second Street

City Winston-Salem State NC Zip Code 27101

Purpose of Disbursement
Service Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11921

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

35.00

SUBTOTAL of Disbursements This Page (optional)

361.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 71 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Branch Banking and Trust

Mailing Address 200 West Second Street

City
Winston-Salem

State
NC

Zip Code
27101

Purpose of Disbursement

Service Charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11960

Date of Disbursement

08 / 21 / 2009

Amount of Each Disbursement this Period

192.00

B.

Full Name (Last, First, Middle Initial)

Branch Banking and Trust

Mailing Address 200 West Second Street

City
Winston-Salem

State
NC

Zip Code
27101

Purpose of Disbursement

Service Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12472

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

128.00

C.

Full Name (Last, First, Middle Initial)

Branch Banking and Trust

Mailing Address 200 West Second Street

City
Winston-Salem

State
NC

Zip Code
27101

Purpose of Disbursement

Service Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12511

Date of Disbursement

11 / 04 / 2009

Amount of Each Disbursement this Period

35.00

SUBTOTAL of Disbursements This Page (optional)

355.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Branch Banking and Trust	Transaction ID: SB21B.12552 Date of Disbursement																				
Mailing Address 200 West Second Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
City Winston-Salem State NC Zip Code 27101 Purpose of Disbursement Service Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>12.70</td> </tr> </table>	12.70																			
12.70																					
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																				
B. Full Name (Last, First, Middle Initial) Callfire	Transaction ID: SB21B.12553 Date of Disbursement																				
Mailing Address 1838 Corinth Ave #3	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	3		2	0	0	9												
City Los Angeles State CA Zip Code 90025 Purpose of Disbursement Phone Bank Svc Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
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																				
C. Full Name (Last, First, Middle Initial) Constant Contact	Transaction ID: SB21B.11906 Date of Disbursement																				
Mailing Address 1601 Trapelo Road, Suite 329 866-289-2101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	9												
City Waltham State MA Zip Code 02451 Purpose of Disbursement E-Mail Service Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
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																				

SUBTOTAL of Disbursements This Page (optional)

762.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 73 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11928

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11932

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

9.68

C.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12454

Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

260.00

SUBTOTAL of Disbursements This Page (optional)

519.68

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 74 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12475

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

260.00

B.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12504

Date of Disbursement

11 / 02 / 2009

Amount of Each Disbursement this Period

260.00

C.

Full Name (Last, First, Middle Initial)

Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329
866-289-2101

City Waltham State MA Zip Code 02451

Purpose of Disbursement

E-Mail Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12538

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

260.00

SUBTOTAL of Disbursements This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 75 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Cooksey Printing

Mailing Address 1920 Wenneca

City
Ft. Worth

State
TX

Zip Code
76102

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.13675

Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

635.32

B.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City
Alpharetta

State
GA

Zip Code
30004

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.11910

Date of Disbursement

07 / 02 / 2009

Amount of Each Disbursement this Period

58.36

C.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City
Alpharetta

State
GA

Zip Code
30004

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.11933

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

332.54

SUBTOTAL of Disbursements This Page (optional)

1026.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 76 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City Alphareta State GA Zip Code 30004

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12456

Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

33.83

B.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City Alphareta State GA Zip Code 30004

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12478

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

30.32

C.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City Alphareta State GA Zip Code 30004

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12508

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

80.56

SUBTOTAL of Disbursements This Page (optional)

144.71

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 77 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Cornerstone American

Mailing Address 12600 Deerfield Pkwy. Ste 375

City Alphareta State GA Zip Code 30004

Purpose of Disbursement
Processing Fee Credit Card

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12539

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

188.39

B.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11915

Date of Disbursement

07 / 08 / 2009

Amount of Each Disbursement this Period

1363.35

C.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11918

Date of Disbursement

07 / 08 / 2009

Amount of Each Disbursement this Period

57.86

SUBTOTAL of Disbursements This Page (optional)

1609.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 78 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11937

Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

1249.83

B.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11938

Date of Disbursement

08 / 07 / 2009

Amount of Each Disbursement this Period

56.24

C.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12458

Date of Disbursement

09 / 08 / 2009

Amount of Each Disbursement this Period

1363.35

SUBTOTAL of Disbursements This Page (optional)

2669.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 79 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12459

Date of Disbursement

09 / 08 / 2009

Amount of Each Disbursement this Period

56.24

B.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12480

Date of Disbursement

10 / 13 / 2009

Amount of Each Disbursement this Period

1363.35

C.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12481

Date of Disbursement

10 / 13 / 2009

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)

1424.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12505

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

1548.85

B.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12506

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

66.86

C.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12544

Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

1363.35

SUBTOTAL of Disbursements This Page (optional)

2979.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 81 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Corporate Payroll Service

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement

Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12545

Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

56.24

B.

Full Name (Last, First, Middle Initial)

CP Communications

Mailing Address 2521 N Ontario St

City Brubank State CA Zip Code 91504-2513

Purpose of Disbursement

Website Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13639

Date of Disbursement

07 / 01 / 2009

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

CP Communications

Mailing Address 2521 N Ontario St

City Brubank State CA Zip Code 91504-2513

Purpose of Disbursement

Website Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13658

Date of Disbursement

10 / 20 / 2009

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional)

956.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

CP Communications

Mailing Address 2521 N Ontario St

City Brubank State CA Zip Code 91504-2513

Purpose of Disbursement
Website Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13664

Date of Disbursement

11 / 13 / 2009

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Discover Network

Mailing Address PO Box 3022

City New Albany State OH Zip Code 43052

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11908

Date of Disbursement

07 / 02 / 2009

Amount of Each Disbursement this Period

63.17

C.

Full Name (Last, First, Middle Initial)

Discover Network

Mailing Address PO Box 3022

City New Albany State OH Zip Code 43052

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11934

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

95.74

SUBTOTAL of Disbursements This Page (optional)

233.91

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Discover Network	Transaction ID: SB21B.12453 Date of Disbursement																				
Mailing Address PO Box 3022	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	9												
City New Albany State OH Zip Code 43052	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">58.25</td> </tr> </table>	58.25																			
58.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Discover Network	Transaction ID: SB21B.12476 Date of Disbursement																				
Mailing Address PO Box 3022	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	9												
City New Albany State OH Zip Code 43052	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">58.25</td> </tr> </table>	58.25																			
58.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Discover Network	Transaction ID: SB21B.12507 Date of Disbursement																				
Mailing Address PO Box 3022	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	9												
City New Albany State OH Zip Code 43052	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">119.37</td> </tr> </table>	119.37																			
119.37																					
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)

235.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 84 / 120

<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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Dotster Inc.	Transaction ID: SB21B.11948 Date of Disbursement																				
Mailing Address PO Box 821066	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	9													
City Vancouver State WA Zip Code 98682	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Business Svc Candidate Name	<table border="1"> <tr> <td colspan="10">15.95</td> </tr> </table>	15.95																			
15.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Dotster Inc.	Transaction ID: SB21B.11950 Date of Disbursement																				
Mailing Address PO Box 821066	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	4		2	0	9													
City Vancouver State WA Zip Code 98682	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Business Svc Candidate Name	<table border="1"> <tr> <td colspan="10">47.85</td> </tr> </table>	47.85																			
47.85																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Dotster Inc.	Transaction ID: SB21B.11955 Date of Disbursement																				
Mailing Address PO Box 821066	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	9													
City Vancouver State WA Zip Code 98682	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Business Svc Candidate Name	<table border="1"> <tr> <td colspan="10">31.90</td> </tr> </table>	31.90																			
31.90																					
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)

95.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Dotster Inc.

Mailing Address PO Box 821066

City
Vancouver

State
WA

Zip Code
98682

Purpose of Disbursement
Internet Business Svcs

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11958

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

47.85

B.

Full Name (Last, First, Middle Initial)

Dotster Inc.

Mailing Address PO Box 821066

City
Vancouver

State
WA

Zip Code
98682

Purpose of Disbursement
Internet Business Svc

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12527

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

15.95

C.

Full Name (Last, First, Middle Initial)

Dotster Inc.

Mailing Address PO Box 821066

City
Vancouver

State
WA

Zip Code
98682

Purpose of Disbursement
Internet Business Svc

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12550

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

15.95

SUBTOTAL of Disbursements This Page (optional)

79.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Dotster Inc.

Mailing Address PO Box 821066

City
Vancouver

State
WA

Zip Code
98682

Purpose of Disbursement
Internet Business Svc

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12551

Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

15.95

B.

Full Name (Last, First, Middle Initial)

Embarq

Mailing Address PO Box 96064

City
Charlotte

State
NC

Zip Code
28296

Purpose of Disbursement
Internet Serv.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11922

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

49.91

C.

Full Name (Last, First, Middle Initial)

Embarq

Mailing Address PO Box 96064

City
Charlotte

State
NC

Zip Code
28296

Purpose of Disbursement
Internet Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11953

Date of Disbursement

08 / 17 / 2009

Amount of Each Disbursement this Period

49.94

SUBTOTAL of Disbursements This Page (optional)

115.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Embarq	Transaction ID: SB21B.12465 Date of Disbursement																				
Mailing Address PO Box 96064	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	9												
City Charlotte State NC Zip Code 28296	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Serv.	<table border="1"> <tr> <td colspan="10">51.04</td> </tr> </table>	51.04																			
51.04																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Embarq	Transaction ID: SB21B.12485 Date of Disbursement																				
Mailing Address PO Box 96064	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	9												
City Charlotte State NC Zip Code 28296	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet Serv.	<table border="1"> <tr> <td colspan="10">55.20</td> </tr> </table>	55.20																			
55.20																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Facebook Inc.	Transaction ID: SB21B.11965 Date of Disbursement																				
Mailing Address 156 University Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	9												
City Palo Alto State CA Zip Code 94301-1605	Amount of Each Disbursement this Period																				
Purpose of Disbursement Advertisement	<table border="1"> <tr> <td colspan="10">14.34</td> </tr> </table>	14.34																			
14.34																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

120.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12457

Date of Disbursement

09 / 04 / 2009

Amount of Each Disbursement this Period

26.53

B.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisements

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12469

Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

146.00

C.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12470

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

148.15

SUBTOTAL of Disbursements This Page (optional)

320.68

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 89 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12471

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

72.04

B.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12487

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12488

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

272.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 90 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12489

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

96.12

B.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12496

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

87.63

C.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12516

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

194.36

SUBTOTAL of Disbursements This Page (optional)

378.11

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 91 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Facebook Inc.

Mailing Address 156 University Ave.

City
Palo Alto

State
CA

Zip Code
94301-1605

Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12517

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

189.51

B.

Full Name (Last, First, Middle Initial)

Hilton Hotels Corporate

Mailing Address 9336 Civic Center Dr

City
Beverly Hills

State
CA

Zip Code
90210

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.11929

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

232.11

C.

Full Name (Last, First, Middle Initial)

Daryl Jurbala

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.13649

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

569.00

SUBTOTAL of Disbursements This Page (optional)

990.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Daryl Jurbala

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Consulting Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.13670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City
Naples

State
FL

Zip Code
34113

Purpose of Disbursement
Press Release Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11936

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.00

C.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City
Naples

State
FL

Zip Code
34113

Purpose of Disbursement
Press Release Svc

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11949

Date of Disbursement

/ /

Amount of Each Disbursement this Period

199.00

SUBTOTAL of Disbursements This Page (optional)

898.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 93 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12462

Date of Disbursement

09 / 09 / 2009

Amount of Each Disbursement this Period

199.00

B.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12463

Date of Disbursement

09 / 11 / 2009

Amount of Each Disbursement this Period

199.00

C.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12464

Date of Disbursement

09 / 15 / 2009

Amount of Each Disbursement this Period

199.00

SUBTOTAL of Disbursements This Page (optional)

597.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 94 / 120

<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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Mass Media Distribution	Transaction ID: SB21B.12482 Date of Disbursement																				
Mailing Address 12693 Tamiami Trl. E. # 222	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	9												
City Naples State FL Zip Code 34113	Amount of Each Disbursement this Period																				
Purpose of Disbursement Press Release Candidate Name	<table border="1"> <tr> <td colspan="10">199.00</td> </tr> </table>	199.00																			
199.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mass Media Distribution	Transaction ID: SB21B.12495 Date of Disbursement																				
Mailing Address 12693 Tamiami Trl. E. # 222	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	1		2	0	0	9												
City Naples State FL Zip Code 34113	Amount of Each Disbursement this Period																				
Purpose of Disbursement Press Release Candidate Name	<table border="1"> <tr> <td colspan="10">199.00</td> </tr> </table>	199.00																			
199.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Mass Media Distribution	Transaction ID: SB21B.11923 Date of Disbursement																				
Mailing Address 12693 Tamiami Trl. E. # 222	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	9												
City Naples State FL Zip Code 34113	Amount of Each Disbursement this Period																				
Purpose of Disbursement Press Release Candidate Name	<table border="1"> <tr> <td colspan="10">199.00</td> </tr> </table>	199.00																			
199.00																					
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)

597.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12536

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

199.00

B.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12513

Date of Disbursement

11 / 10 / 2009

Amount of Each Disbursement this Period

199.00

C.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement
Press Release Svc

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12515

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

199.00

SUBTOTAL of Disbursements This Page (optional)

597.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement

Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12542

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

199.00

B.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement

Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12548

Date of Disbursement

12 / 16 / 2009

Amount of Each Disbursement this Period

199.00

C.

Full Name (Last, First, Middle Initial)

Mass Media Distribution

Mailing Address 12693 Tamiami Trl. E. # 222

City Naples State FL Zip Code 34113

Purpose of Disbursement

Press Release

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12554

Date of Disbursement

12 / 29 / 2009

Amount of Each Disbursement this Period

199.00

SUBTOTAL of Disbursements This Page (optional)

597.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Mass Media Distribution	Transaction ID: SB21B.12555 Date of Disbursement																				
Mailing Address 12693 Tamiami Trl. E. # 222	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	0	9												
City Naples State FL Zip Code 34113	Amount of Each Disbursement this Period																				
Purpose of Disbursement Press Release Candidate Name	<table border="1"> <tr> <td colspan="10">199.00</td> </tr> </table>	199.00																			
199.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) My Space Inc	Transaction ID: SB21B.12546 Date of Disbursement																				
Mailing Address 407 North Maple Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	9												
City Beverly Hills State CA Zip Code 90210	Amount of Each Disbursement this Period																				
Purpose of Disbursement Advertisement Candidate Name	<table border="1"> <tr> <td colspan="10">101.00</td> </tr> </table>	101.00																			
101.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Palmer Web Consulting	Transaction ID: SB21B.13634 Date of Disbursement																				
Mailing Address PO Box 1992	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	0	9												
City Old Fort State NC Zip Code 28762	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">600.00</td> </tr> </table>	600.00																			
600.00																					
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)

900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 98 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Palmer Web Consulting

Mailing Address PO Box 1992

City
Old Fort

State
NC

Zip Code
28762

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13638

Date of Disbursement

07 / 08 / 2009

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Palmer Web Consulting

Mailing Address PO Box 1992

City
Old Fort

State
NC

Zip Code
28762

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13645

Date of Disbursement

08 / 08 / 2009

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622-0966

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13635

Date of Disbursement

07 / 01 / 2009

Amount of Each Disbursement this Period

554.10

SUBTOTAL of Disbursements This Page (optional)

1754.10

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 99 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
RaleighState
NCZip Code
27622-0966Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.13637

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

Amount of Each Disbursement this Period

554.10

B.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
RaleighState
NCZip Code
27622-0966Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.13653

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	9

Amount of Each Disbursement this Period

554.10

C.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
RaleighState
NCZip Code
27622-0966Purpose of Disbursement
Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.13657

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
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Amount of Each Disbursement this Period

554.10

SUBTOTAL of Disbursements This Page (optional)

1662.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622-0966

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13662

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

554.10

B.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622-0966

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13668

Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

554.10

C.

Full Name (Last, First, Middle Initial)

Ms Jane Patterson

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622-0966

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13674

Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

459.40

SUBTOTAL of Disbursements This Page (optional)

1567.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

US Postal Service

Mailing Address 4325 Glenwood Ave.

City
Raleigh

State
NC

Zip Code
27612

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13674.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

176.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address 6600 North Military

City
Trail Boca Raton

State
FL

Zip Code
33496

Purpose of Disbursement
Office supplies, Ink and Stamps

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13674.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

283.40

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City
San Jose

State
CA

Zip Code
95125

Purpose of Disbursement
Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11850

Date of Disbursement

/ /

Amount of Each Disbursement this Period

194.09

SUBTOTAL of Disbursements This Page (optional)

194.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement

Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.11967

Date of Disbursement

08 / 01 / 2009

Amount of Each Disbursement this Period

12.22

B.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement

Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12451

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

7.78

C.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement

Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12474

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

69.89

SUBTOTAL of Disbursements This Page (optional)

89.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 103 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City State Zip Code
San Jose CA 95125

Purpose of Disbursement
Directory

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

550.00

B.

Full Name (Last, First, Middle Initial)

William Cross

Mailing Address

City State Zip Code
TN

Purpose of Disbursement
Website Development

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.12483.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

550.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City State Zip Code
San Jose CA 95125

Purpose of Disbursement
Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.14050

Date of Disbursement

/ /

Amount of Each Disbursement this Period

108.26

SUBTOTAL of Disbursements This Page (optional)

658.26

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B**
Transaction ID : **SB21B.12483**

Contacted via e-mail for mailing address.

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 105 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City
San Jose

State
CA

Zip Code
95125

Purpose of Disbursement
Directory

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12534

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

William Cross

Mailing Address

City

State
TN

Zip Code

Purpose of Disbursement
Website Development

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12534.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address 2145 Hamilton Avenue

City
San Jose

State
CA

Zip Code
95125

Purpose of Disbursement
Credit Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12557

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.66

SUBTOTAL of Disbursements This Page (optional)

265.66

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B**
Transaction ID : **SB21B.12534**

Contacted via e-mail for mailing address

**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 107 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13640

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	9

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement
Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

520.00

B.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13642

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	9

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement
Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

520.00

C.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13643

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	9

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement
Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)

1065.00

TOTAL This Period (last page this line number only)

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

PAGE 108 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13648

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement

Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

520.00

B.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13655

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	9

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement

Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

520.00

C.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Transaction ID: SB21B.13659

Date of Disbursement

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

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement

Internet Server

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

560.00

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement
Internet Server

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13663

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

560.00

B.

Full Name (Last, First, Middle Initial)

Rackspace Managed Hosting

Mailing Address 9725 Datapoint Drive, Suite 100
210-447-4000

City San Antonio State TX Zip Code 78229

Purpose of Disbursement
Internet Server

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13669

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

560.00

C.

Full Name (Last, First, Middle Initial)

Sage Payments Solutions

Mailing Address 1750 Old Meadow Rd. #300

City Mclean State VA Zip Code 22102

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11927

Date of Disbursement

07 / 30 / 2009

Amount of Each Disbursement this Period

318.48

SUBTOTAL of Disbursements This Page (optional)

1438.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 / 120

<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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Sage Payments Solutions	Transaction ID: SB21B.11968 Date of Disbursement																				
Mailing Address 1750 Old Meadow Rd. #300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	0	9												
City Mclean State VA Zip Code 22102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">2.54</td> </tr> </table>	2.54																			
2.54																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sage Payments Solutions	Transaction ID: SB21B.12473 Date of Disbursement																				
Mailing Address 1750 Old Meadow Rd. #300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	9												
City Mclean State VA Zip Code 22102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">9.12</td> </tr> </table>	9.12																			
9.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sage Payments Solutions	Transaction ID: SB21B.14047 Date of Disbursement																				
Mailing Address 1750 Old Meadow Rd. #300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	9												
City Mclean State VA Zip Code 22102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">58.70</td> </tr> </table>	58.70																			
58.70																					
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)

70.36

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 111 / 120

<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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Sage Payments Solutions	Transaction ID: SB21B.14048 Date of Disbursement																				
Mailing Address 1750 Old Meadow Rd. #300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	9												
City Mclean State VA Zip Code 22102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">218.46</td> </tr> </table>	218.46																			
218.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sage Payments Solutions	Transaction ID: SB21B.12558 Date of Disbursement																				
Mailing Address 1750 Old Meadow Rd. #300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	0	/	2	0	0	9												
City Mclean State VA Zip Code 22102	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">54.12</td> </tr> </table>	54.12																			
54.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Target Corporation Retail	Transaction ID: SB21B.11931 Date of Disbursement																				
Mailing Address 1000 Nicollet Mall Minneapolis 612-304-6073	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	3	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8	/	0	3	/	2	0	0	9												
City Minneapolis State MN Zip Code 55403	Amount of Each Disbursement this Period																				
Purpose of Disbursement Computer Equipment and Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">109.90</td> </tr> </table>	109.90																			
109.90																					
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)

382.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 112 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11920

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

137.77

B.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.11952

Date of Disbursement

08 / 17 / 2009

Amount of Each Disbursement this Period

138.84

C.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12468

Date of Disbursement

09 / 17 / 2009

Amount of Each Disbursement this Period

152.72

SUBTOTAL of Disbursements This Page (optional)

429.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12484

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

188.32

B.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12519

Date of Disbursement

11 / 16 / 2009

Amount of Each Disbursement this Period

174.31

C.

Full Name (Last, First, Middle Initial)

Time Warner Cable

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement
Broadband Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.12559

Date of Disbursement

12 / 17 / 2009

Amount of Each Disbursement this Period

176.46

SUBTOTAL of Disbursements This Page (optional)

539.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 114 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

US Postal Service

Mailing Address 4325 Glenwood Ave.

City
Raleigh

State
NC

Zip Code
27612

Purpose of Disbursement
PO Box Fee & Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.11963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

176.00

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address 1 Verizon Way
(800)214-3555

City
Basking Ridge

State
NJ

Zip Code
07920-1025

Purpose of Disbursement
Services and Merchandise

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12466

Date of Disbursement

/ /

Amount of Each Disbursement this Period

192.73

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address 1 Verizon Way
(800)214-3555

City
Basking Ridge

State
NJ

Zip Code
07920-1025

Purpose of Disbursement
Services and Merchandise

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.12486

Date of Disbursement

/ /

Amount of Each Disbursement this Period

184.02

SUBTOTAL of Disbursements This Page (optional)

552.75

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 115 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: SB21B.12514

Date of Disbursement

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

Mailing Address 1 Verizon Way
(800)214-3555

Amount of Each Disbursement this Period

City Basking Ridge State NJ Zip Code 07920-1025

203.60

Purpose of Disbursement
Cell Phone Service

Category/ Type

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: SB21B.12549

Date of Disbursement

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

Mailing Address 1 Verizon Way
(800)214-3555

Amount of Each Disbursement this Period

City Basking Ridge State NJ Zip Code 07920-1025

169.49

Purpose of Disbursement
Services and Merchandise

Category/ Type

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Vonage

Transaction ID: SB21B.11914

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

Mailing Address 23 Main St

Amount of Each Disbursement this Period

City Holmdel State NJ Zip Code 07733

38.98

Purpose of Disbursement
Telephone Service

Category/ Type

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

412.07

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 116 / 120

<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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.11943 Date of Disbursement																				
Mailing Address 23 Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	0	9												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">46.13</td> </tr> </table>	46.13																			
46.13																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.12461 Date of Disbursement																				
Mailing Address 23 Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	8		2	0	0	9												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">44.40</td> </tr> </table>	44.40																			
44.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.12479 Date of Disbursement																				
Mailing Address 23 Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	9												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">42.28</td> </tr> </table>	42.28																			
42.28																					
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)

132.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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)

Americans for Legal Immigration PAC

A. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.12512 Date of Disbursement
Mailing Address 23 Main St	<div> <div>^M1</div> <div>^M</div> <div>/</div> <div>^D0</div> <div>^D9</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y9</div> </div>
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Service Candidate Name	<div>53.01</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.12543 Date of Disbursement
Mailing Address 23 Main St	<div> <div>^M1</div> <div>^M2</div> <div>/</div> <div>^D0</div> <div>^D7</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y9</div> </div>
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Service Candidate Name	<div>53.47</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) William Gheen	Transaction ID: SB21B.13636 Date of Disbursement
Mailing Address PO Box 30966	<div> <div>^M0</div> <div>^M7</div> <div>/</div> <div>^D0</div> <div>^D8</div> <div>/</div> <div>^Y2</div> <div>^Y0</div> <div>^Y0</div> <div>^Y9</div> </div>
City Raleigh State NC Zip Code 27622	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div>3271.47</div>
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)

3377.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 118 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13650

Date of Disbursement

08 / 01 / 2009

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13644

Date of Disbursement

08 / 08 / 2009

Amount of Each Disbursement this Period

3271.47

C.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13652

Date of Disbursement

09 / 08 / 2009

Amount of Each Disbursement this Period

3271.47

SUBTOTAL of Disbursements This Page (optional)

6942.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 119 / 120

<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)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13656

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

3271.47

B.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13660

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

3271.47

C.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.13665

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

891.00

SUBTOTAL of Disbursements This Page (optional)

7433.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Legal Immigration PAC

A.

Full Name (Last, First, Middle Initial)

William Gheen

Mailing Address PO Box 30966

City
Raleigh

State
NC

Zip Code
27622

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13667

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2009

Amount of Each Disbursement this Period

3271.47

SUBTOTAL of Disbursements This Page (optional)

3271.47

TOTAL This Period (last page this line number only)

54911.86