

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

One Nation PAC

ADDRESS (number and street) PO BOX 10144

Check if different than previously reported. (ACC) Palm Desert CA 92255

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00468447

3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One)

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

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

(c) 12-Day PRE-Election Report for the:
Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)
Election on: MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the:
General (30G)
Runoff (30R)
Special (30S)
Election on: MM / DD / YYYY in the State of

5. Covering Period MM/DD/YYYY 10/18/2012 through MM/DD/YYYY 11/26/2012

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 Mr. Dan Backer Esq.

Signature of Treasurer Mr. Dan Backer Esq. [Electronically Filed] Date 12/07/2012

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

One Nation PAC

Report Covering the Period: From:    10 /    18 /  2012 To:    11 /    26 /  2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYY"/> 2012		3280.97
(b) Cash on Hand at Beginning of Reporting Period.....	19054.74	
(c) Total Receipts (from Line 19) .....	21484.50	61449.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	40539.24	64730.11
7. Total Disbursements (from Line 31).....	21608.26	45799.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	18930.98	18930.98
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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)

Write or Type Committee Name

**One Nation PAC**

Report Covering the Period: From:  /  /  To:  /  /

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).....	6275.00	15925.00
(ii) Unitemized .....	15209.50	42324.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21484.50	58249.14
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	21484.50	58749.14
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	200.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	2500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	21484.50	61449.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21484.50	61449.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	17558.26	38456.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	17558.26	38456.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3900.00	6942.40
24. Independent Expenditures (use Schedule E) .....	0.00	250.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	25.00	25.00
(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)).....	25.00	25.00
29. Other Disbursements .....	125.00	125.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21608.26	45799.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21608.26	45799.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21484.50	58749.14
34. Total Contribution Refunds (from Line 28(d)) .....	25.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21459.50	58724.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17558.26	38456.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17558.26	38456.73

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

This amendment corrects a local party contribution as being on Line 29, not Line 21 as originally reported.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 24  
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)  
**A. Allen Cecil**

Mailing Address 13818 Almahurst Circle

City State Zip Code  
Cypress TX 77429

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

Name of Employer Occupation  
Retired none

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2012

Transaction ID : **SA11AI.19201**

Amount of Each Receipt this Period  
190.00

Full Name (Last, First, Middle Initial)  
**B. Nelson Crespo**

Mailing Address 20418 N. Tanglewood Dr.

City State Zip Code  
Sun City West AZ 85375

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

Name of Employer Occupation  
Intertiol Control Systems, Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2012

Transaction ID : **SA11AI.19279**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. ernest franklin**

Mailing Address 1 brookhaven dr  
PH400

City State Zip Code  
atlanta GA 30319

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

Name of Employer Occupation  
retired retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2012

Transaction ID : **SA11AI.18950**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00

**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 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)  
**A. ernest franklin**

Mailing Address 1 brookhaven dr  
PH400

City atlanta                      State GA                      Zip Code 30319

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

Name of Employer retired                      Occupation retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2012  
**Transaction ID : SA11AI.18951**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. ron george**

Mailing Address 5930 west andechs summit

City duluth                      State GA                      Zip Code 30097

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

Name of Employer SELF EMPLOYED                      Occupation insurance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2012  
**Transaction ID : SA11AI.18947**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**c. Alan Guerrieri**

Mailing Address P. O. Box 680

City Ocean City                      State MD                      Zip Code 21843

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

Name of Employer retired                      Occupation not applicable

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2012  
**Transaction ID : SA11AI.18908**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1600.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial) <b>A. jeffrey harden</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 <b>Transaction ID : SA11AI.19408</b>
Mailing Address 2475 19th street		Amount of Each Receipt this Period 500.00
City west linn	State OR	Zip Code 97068
FEC ID number of contributing federal political committee. C		
Name of Employer self employed	Occupation importer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. LEE M HOLMES</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : SA11AI.19406</b>
Mailing Address 530 W. O'BRIEN DR.		Amount of Each Receipt this Period 500.00
City HAGATNA	State GU	Zip Code 96910
FEC ID number of contributing federal political committee. C		
Name of Employer SOUTHERN MEDIA, INC.	Occupation mager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : SA11AI.19378</b>
Mailing Address 163 Los Vientos		Amount of Each Receipt this Period 50.00
City San Carlos	State CA	Zip Code 94070
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
	<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)  
**One Nation PAC**

Full Name (Last, First, Middle Initial) <b>A. Edward Moy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012 <b>Transaction ID : SA11AI.19379</b>
Mailing Address 791 Lakehaven Dr.		Amount of Each Receipt this Period 500.00
City Sunnyvale      State CA      Zip Code 94089	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00
Name of Employer Apple Inc      Occupation computer programmer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. David Raring</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2012 <b>Transaction ID : SA11AI.19427</b>
Mailing Address 12007 NE 95th St		Amount of Each Receipt this Period 1000.00
City Vancouver      State WA      Zip Code 98682	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00
Name of Employer The Raring Corporation      Occupation Magement	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Abram Ratner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : SA11AI.18772</b>
Mailing Address 5 Strawberry Bank Rd. Unit 12		Amount of Each Receipt this Period 100.00
City Nashua      State NH      Zip Code 03062-0000	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 290.00
Name of Employer Peak Technical      Occupation Enginer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)  
**A. Abram Ratner**

Mailing Address 5 Strawberry Bank Rd.  
Unit 12

City State Zip Code  
Nashua NH 03062-0000

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

Name of Employer Occupation  
Peak Technical Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 26 / 2012  
**Transaction ID : SA11AI.18773**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Abram Ratner**

Mailing Address 5 Strawberry Bank Rd.  
Unit 12

City State Zip Code  
Nashua NH 03062-0000

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

Name of Employer Occupation  
Peak Technical Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 03 / 2012  
**Transaction ID : SA11AI.18774**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. Eleanor R Seaman**

Mailing Address 164 Gomez Road

City State Zip Code  
Hobe Sound FL 33455

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

Name of Employer Occupation  
homemaker homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 02 / 2012  
**Transaction ID : SA11AI.18977**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 24  
(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)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)  
**A. Brian Shahan**

Mailing Address 4304 Buchanan Dr.

City Plano	State TX	Zip Code 75024
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FEC ID number of contributing federal political committee. **C**

Name of Employer Shahan & Son, Ltd.	Occupation President
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

**Transaction ID : SA11AI.19161**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 27671 Deputy Circle

City Laguna Hills	State CA	Zip Code 92653
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

**Transaction ID : SA11AI.19360**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Vernon Taylor**

Mailing Address 2301 W Mosely Loop

City Alpine	State TX	Zip Code 79830
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Petroleum logistics consultant
-----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2012

**Transaction ID : SA11AI.19228**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 13 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)  
**A. Carol Wilson**

Mailing Address 2197 Sutter View Land

City Lincoln State CA Zip Code 95648

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

Name of Employer Retired Occupation none

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11AI.19398**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. Robert J Yamin**

Mailing Address 66 BARNUM ROAD

City DANBURY State CT Zip Code 06811-0000

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

Name of Employer YAMIN & YAMIN, LLP Occupation attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : SA11AI.18792**

Amount of Each Receipt this Period  
**35.00**

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>235.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>6275.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

Transaction ID : SB21B.19519

Amount of Each Disbursement this Period

2134.99

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2012

Transaction ID : SB21B.19548

Amount of Each Disbursement this Period

2232.99

Full Name (Last, First, Middle Initial)

**C. Campaign Solutions**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
List rental

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 26 / 2012

Transaction ID : SB21B.19560

Amount of Each Disbursement this Period

4215.90

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

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

8583.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Solutions**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 26 / 2012

Transaction ID : SB21B.19561

Amount of Each Disbursement this Period

1695.69

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies PLLC**

Mailing Address P.O. Box 75021

City Washington State DC Zip Code 20013

Purpose of Disbursement  
PAC Legal/Treasurer Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2012

Transaction ID : SB21B.19518

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DB Capitol Strategies PLLC**

Mailing Address P.O. Box 75021

City Washington State DC Zip Code 20013

Purpose of Disbursement  
PAC Legal/Treasurer Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2012

Transaction ID : SB21B.19523

Amount of Each Disbursement this Period

500.00

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

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

2695.69

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. DB Capitol Strategies PLLC**

Mailing Address P.O. Box 75021

City Washington State DC Zip Code 20013

Purpose of Disbursement  
PAC Legal/Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19534**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies PLLC**

Mailing Address P.O. Box 75021

City Washington State DC Zip Code 20013

Purpose of Disbursement  
PAC Legal/Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19544**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. eDonation.com**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Processing Fees (10/18/12 to 10/31/12)

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19538**

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<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)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. eDonation.com**

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Processing Fees (11/01/12 to 11/26/12)

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2012			

Transaction ID : SB21B.19552

Amount of Each Disbursement this Period

299.95
--------

Full Name (Last, First, Middle Initial)

**B. Eusatrix Corporation**

Mailing Address P.O. Box 2543

City Palm Springs State CA Zip Code 92263

Purpose of Disbursement  
PAC Management Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2012			

Transaction ID : SB21B.19520

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Eusatrix Corporation**

Mailing Address P.O. Box 2543

City Palm Springs State CA Zip Code 92263

Purpose of Disbursement  
Reimbursement for website expenses

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2012			

Transaction ID : SB21B.19463

Amount of Each Disbursement this Period

349.00
--------

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

1648.95
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. Eusatrix Corporation**

Mailing Address P.O. Box 2543

City State Zip Code  
Palm Springs CA 92263

Purpose of Disbursement  
PAC Management Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19549**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Eusatrix Corporation**

Mailing Address P.O. Box 2543

City State Zip Code  
Palm Springs CA 92263

Purpose of Disbursement  
PAC Management Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19551**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Homestead Technologies, Inc.**

Mailing Address 180 Jefferson Drive

City State Zip Code  
Menlo Park CA 94025

Purpose of Disbursement  
Payment to Eusatrix Corp for web dev

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.19481**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. One Nation PAC**

Mailing Address PO BOX 10144

City State Zip Code  
Palm Desert CA 92255

Purpose of Disbursement  
Transfer to Carey Account

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

**Transaction ID : SB21B.19563**

Amount of Each Disbursement this Period

300.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 5001 Ramon Road

City State Zip Code  
Palm Springs CA 92264

Purpose of Disbursement  
PAC Computer Equipment

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2012			

**Transaction ID : SB21B.19543**

Amount of Each Disbursement this Period

430.99
--------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

430.99
--------

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

17255.25
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. ALLEN WEST FOR CONGRESS**

Mailing Address PO BOX 1108

City STUART State FL Zip Code 34995

Purpose of Disbursement  
U.S. House FL-18, General 2012

011

Category/  
Type

Candidate Name

**ALLEN B WEST**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012

Transaction ID : SB23.19525

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ALLEN WEST FOR CONGRESS**

Mailing Address PO BOX 1108

City STUART State FL Zip Code 34995

Purpose of Disbursement  
U.S. House FL-18, General 2012

011

Category/  
Type

Candidate Name

**ALLEN B WEST**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2012

Transaction ID : SB23.19528

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ALLEN WEST FOR CONGRESS**

Mailing Address PO BOX 1108

City STUART State FL Zip Code 34995

Purpose of Disbursement  
U.S. House FL-18, General 2012

011

Category/  
Type

Candidate Name

**ALLEN B WEST**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2012

Transaction ID : SB23.19539

Amount of Each Disbursement this Period

750.00

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. BACHMANN FOR CONGRESS**

Mailing Address PO BOX 25950

City State Zip Code  
WOODBURY MN 55125

Purpose of Disbursement  
U.S. House MN-06, General 2012

011

Candidate Name

**MICHELE BACHMANN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MN District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SB23.19531**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. BACHMANN FOR CONGRESS**

Mailing Address PO BOX 25950

City State Zip Code  
WOODBURY MN 55125

Purpose of Disbursement  
U.S. House MN-06, General 2012

011

Candidate Name

**MICHELE BACHMANN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MN District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SB23.19545**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DOHENY FOR CONGRESS**

Mailing Address 65 HIGH STREET

City State Zip Code  
ALEXANDRIA BAY NY 13607

Purpose of Disbursement  
U.S. House NY-21, General 2012

011

Candidate Name

**MATT DOHENY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SB23.19537**

Amount of Each Disbursement this Period

100.00

**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)

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

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NAME OF COMMITTEE (In Full)

**One Nation PAC**

Full Name (Last, First, Middle Initial)

## A. GEORGE ALLEN FOR US SENATE

Mailing Address 2819 NORTH PARHAM ROAD  
SUITE 210

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement  
U.S. Senate VA, General 2012

011

Category/  
Type

Candidate Name

**GEORGE ALLEN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SB23.19530

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

## B. HELLER FOR SENATE

Mailing Address PO BOX 371907

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement  
U.S. Senate NV, General 2012

011

Category/  
Type

Candidate Name

**DEAN HELLER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB23.19540

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

## C. JEFF FLAKE FOR US SENATE INC

Mailing Address PO BOX 12512

City TEMPE State AZ Zip Code 85284

Purpose of Disbursement  
U.S. Senate AZ, General 2012

011

Category/  
Type

Candidate Name

**JEFF FLAKE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SB23.19533

Amount of Each Disbursement this Period

250.00
--------

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

750.00
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. MARY BONO MACK COMMITTEE**

Mailing Address PO BOX 3370

City PALM SPRINGS State CA Zip Code 92263

Purpose of Disbursement  
U.S. House CA-36, General 2012

011

Category/  
Type

Candidate Name

**MARY BONO MACK**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

**Transaction ID : SB23.19535**

Amount of Each Disbursement this Period

150.00
--------

Full Name (Last, First, Middle Initial)

**B. RICKY GILL FOR CONGRESS**

Mailing Address P.O. BOX 691900

City STOCKTON State CA Zip Code 95269

Purpose of Disbursement  
U.S. House CA-09, General 2012

011

Category/  
Type

Candidate Name

**RICKY GILL**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

**Transaction ID : SB23.19536**

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**C. SCOTT BROWN FOR US SENATE COMMITTEE**

Mailing Address P.O. Box 395

City WRENTHAM State MA Zip Code 02093

Purpose of Disbursement  
U.S. Senate MA, General 2012

011

Category/  
Type

Candidate Name

**SCOTT P BROWN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

**Transaction ID : SB23.19529**

Amount of Each Disbursement this Period

50.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

300.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**One Nation PAC**

Full Name (Last, First, Middle Initial)

**A. TODD AKIN FOR SENATE**

Mailing Address PO BOX 31222

City ST LOUIS State MO Zip Code 63131

Purpose of Disbursement  
U.S. Senate MO, General 2012

Candidate Name  
**W TODD AKIN**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: MO District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : SB23.19532**

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

250.00

3700.00