

# 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

Rely on Your Beliefs Fund

ADDRESS (number and street) 209 Pennsylvania Avenue, SE

Check if different than previously reported. (ACC) Washington DC 20003

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

C C00344648

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - 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] 05 / 01 / 2012 through [MM] / [DD] / [YYYY] 05 / 31 / 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 Paul Kilgore

Signature of Treasurer Paul Kilgore [Electronically Filed] Date 06 / 20 / 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.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Rely on Your Beliefs Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		200806.26
(b) Cash on Hand at Beginning of Reporting Period.....	147834.14	
(c) Total Receipts (from Line 19) .....	34500.00	149250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	182334.14	350056.26
7. Total Disbursements (from Line 31).....	68773.39	236495.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	113560.75	113560.75
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

**Rely on Your Beliefs Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2012 To: M M / D D / Y Y Y Y 05 / 31 / 2012

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).....	2500.00	23750.00
(ii) Unitemized .....	0.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500.00	24250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	32000.00	125000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	34500.00	149250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	34500.00	149250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	34500.00	149250.00

**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 .....	25273.39	142995.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25273.39	142995.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43500.00	93500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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) 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)) ..	68773.39	236495.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68773.39	236495.51

**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) .....	34500.00	149250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34500.00	149250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	25273.39	142995.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25273.39	142995.51

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<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)  
**Rely on Your Beliefs Fund**

**A. Justin McCarthy**  
Full Name (Last, First, Middle Initial)

Mailing Address 8804 Wooden Bridge Rd

City Potomac State MD Zip Code 20854-2445

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

Name of Employer Peck Madigan Jones & Stewart Occupation Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2012  
**Transaction ID : 20507.C1308**

Amount of Each Receipt this Period 1000.00

Receipt

**B. Thomas Neff**  
Full Name (Last, First, Middle Initial)

Mailing Address 12024 Lost Tree Way

City North Palm Beach State FL Zip Code 33408-2919

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2012  
**Transaction ID : 20615.C1311**

Amount of Each Receipt this Period 500.00

Receipt

**c. Marjorie Odeen**  
Full Name (Last, First, Middle Initial)

Mailing Address 11050 Turtle Beach Rd # C202

City North Palm Beach State FL Zip Code 33408-3410

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 24 / 2012  
**Transaction ID : 20615.C1309**

Amount of Each Receipt this Period 1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)  
**A. American Assoc of Home Builders PAC**

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 24 / 2012  
**Transaction ID : 20615.C1312**

Amount of Each Receipt this Period  
5000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. American Assoc of Nurse Anesthetists PAC**

Mailing Address 222 S Prospect Ave

City Park Ridge State IL Zip Code 60068-4037

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 24 / 2012  
**Transaction ID : 20615.C1317**

Amount of Each Receipt this Period  
5000.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. ARDA ROC-PAC**

Mailing Address 1201 15th St NW Ste 400

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C C00358663**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 24 / 2012  
**Transaction ID : 20615.C1314**

Amount of Each Receipt this Period  
2500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 8 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial) <b>A. Comm. for the Advancement of Cotton</b>		Date of Receipt
Mailing Address PO Box 2995		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City State Zip Code Cordova TN 38088-2995		<b>Transaction ID : 20507.C1307</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00023028"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mortgage Bankers Association PAC</b>		Date of Receipt
Mailing Address 1919 Pennsylvania Ave NW		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Washington DC 20006-3400		<b>Transaction ID : 20615.C1313</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00004812"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. NAIOP-PAC</b>		Date of Receipt
Mailing Address 2201 Cooperative Way Fl 3		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Herndon VA 20171-4583		<b>Transaction ID : 20615.C1315</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00233304"/>		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



**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 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial) <b>A. Novartis PAC</b>		Date of Receipt MM / DD / YYYY 05 / 24 / 2012 <b>Transaction ID : 20615.C1324</b>
Mailing Address 701 Pennsylvania Ave NW Ste 725		Amount of Each Receipt this Period 2500.00
City Washington	State DC	Zip Code 20004-2608
FEC ID number of contributing federal political committee. C C00033969		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Peabody PAC</b>		Date of Receipt MM / DD / YYYY 05 / 24 / 2012 <b>Transaction ID : 20615.C1310</b>
Mailing Address 701 Market St		Amount of Each Receipt this Period 2500.00
City Saint Louis	State MO	Zip Code 63101-1830
FEC ID number of contributing federal political committee. C C00110478		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Pfizer PAC</b>		Date of Receipt MM / DD / YYYY 05 / 04 / 2012 <b>Transaction ID : 20507.C1306</b>
Mailing Address 325 7th St NW Ste 1200		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20004-2820
FEC ID number of contributing federal political committee. C C00016683		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 10 OF 21  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Rely on Your Beliefs Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Raytheon PAC**

Mailing Address 1100 Wilson Blvd Ste 1500

City State Zip Code  
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2012

**Transaction ID : 20615.C1316**

Amount of Each Receipt this Period  
2000.00

Receipt

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

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  
MM / DD / YYYY

Amount of Each Receipt this Period

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

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  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	32000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2012

**Transaction ID : 20507.E2283**

Amount of Each Disbursement this Period

1972.09
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SEE BELOW

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2012

**Transaction ID : 20507.E2284**

Amount of Each Disbursement this Period

317.99
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**[MEMO ITEM]**  
MEMO: PAC TELEPHONE

Full Name (Last, First, Middle Initial)

**C. Johnnys Half Shell**

Mailing Address 400 N Capitol St NW

City Washington State DC Zip Code 20001-1511

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2012

**Transaction ID : 20507.E2285**

Amount of Each Disbursement this Period

1654.10
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**[MEMO ITEM]**  
MEMO: PAC EVENT CATERING

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

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

1972.09
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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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Roy Blunt**

Mailing Address PO Box 50100

City Springfield State MO Zip Code 65805-0100

Purpose of Disbursement  
PAC Meeting & Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 20518.E2294**

Amount of Each Disbursement this Period

PAC MEETING & TRAVEL EXPENSES

Full Name (Last, First, Middle Initial)

**B. GMD Technologies**

Mailing Address PO Box 3663

City Jackson Hole State WY Zip Code 83001-3663

Purpose of Disbursement  
PAC IT Services

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 20615.E2295**

Amount of Each Disbursement this Period

PAC IT SERVICES

Full Name (Last, First, Middle Initial)

**C. Keri Ann Hayes**

Mailing Address 202 11th St NE

City Washington State DC Zip Code 20002-6218

Purpose of Disbursement  
PAC Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 20507.E2282**

Amount of Each Disbursement this Period

PAC TRAVEL EXPENSES

**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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Professional Data Services, Inc.**

Mailing Address 2470 Daniels Bridge Rd Ste 121

City Athens State GA Zip Code 30606-6188

Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2012

**Transaction ID : 20615.E2321**

Amount of Each Disbursement this Period

1532.85

PAC COMPLIANCE CONSULTING

Full Name (Last, First, Middle Initial)

**B. Thompson Communications**

Mailing Address PO Box 5

City Marshfield State MO Zip Code 65706-0005

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 11 / 2012

**Transaction ID : 20518.E2286**

Amount of Each Disbursement this Period

12897.89

SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Thompson Communications**

Mailing Address PO Box 5

City Marshfield State MO Zip Code 65706-0005

Purpose of Disbursement  
PAC Administration

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 11 / 2012

**Transaction ID : 20518.E2287**

Amount of Each Disbursement this Period

730.07

**[MEMO ITEM]**  
MEMO: PAC ADMINISTRATION

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

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

14430.74

**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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Keri Ann Hayes**

Mailing Address 202 11th St NE

City Washington State DC Zip Code 20002-6218

Purpose of Disbursement  
PAC Salary & Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 11 / 2012

**Transaction ID : 20518.E2288**

Amount of Each Disbursement this Period

12167.82

**[MEMO ITEM]**

MEMO: PAC SALARY & BENEFITS

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 19769

City Irvine State CA Zip Code 92623-9769

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2012

**Transaction ID : 20615.E2297**

Amount of Each Disbursement this Period

153.10

PAC TELEPHONE

Full Name (Last, First, Middle Initial)

**C. Visa**

Mailing Address PO Box 4512

City Carol Stream State IL Zip Code 60197-4512

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

**Transaction ID : 20507.E2274**

Amount of Each Disbursement this Period

6596.87

SEE BELOW

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

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

6749.97

**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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

**Transaction ID : 20507.E2275**

Amount of Each Disbursement this Period

3138.80

**[MEMO ITEM]**

MEMO: PAC AIRFARE

Full Name (Last, First, Middle Initial)

**B. Enterprise Rent-A- Car**

Mailing Address 398 Meeting St

City Charleston State SC Zip Code 29403-6233

Purpose of Disbursement  
PAC Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

**Transaction ID : 20507.E2276**

Amount of Each Disbursement this Period

288.38

**[MEMO ITEM]**

MEMO: PAC CAR RENTAL

Full Name (Last, First, Middle Initial)

**C. Flemings**

Mailing Address 1855 S Lindbergh Blvd

City Saint Louis State MO Zip Code 63131-3502

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

**Transaction ID : 20507.E2277**

Amount of Each Disbursement this Period

217.17

**[MEMO ITEM]**

MEMO: PAC EVENT CATERING

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

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

0.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Walt Disney World**

Mailing Address 500 S Buena Vista St

City Burbank State CA Zip Code 91521-0001

Purpose of Disbursement  
PAC Event Tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

Transaction ID : 20507.E2279

Amount of Each Disbursement this Period

393.40

**[MEMO ITEM]**  
MEMO: PAC EVENT TICKETS

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address PO Box 72470244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
PAC Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

Transaction ID : 20507.E2280

Amount of Each Disbursement this Period

89.52

**[MEMO ITEM]**  
MEMO: PAC SHIPPING

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 1200 E Algonquin Rd

City Arlington Heights State IL Zip Code 60005-4712

Purpose of Disbursement  
PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2012

Transaction ID : 20507.E2281

Amount of Each Disbursement this Period

1785.20

**[MEMO ITEM]**  
MEMO: PAC AIRFARE

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

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

0.00



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

Use separate schedule(s)  
for each category of the  
Detailed Summary 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Dan Williams**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
PAC Rent & Phones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2012

**Transaction ID : 20615.E2322**

Amount of Each Disbursement this Period

473.44

PAC RENT & PHONES

Full Name (Last, First, Middle Initial)

**B. Dan Williams**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
PAC Telephones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 11 / 2012

**Transaction ID : 20518.E2289**

Amount of Each Disbursement this Period

70.09

PAC TELEPHONES

Full Name (Last, First, Middle Initial)

**C. Dan Williams**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
PAC Rent & Phones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2012

**Transaction ID : 20615.E2296**

Amount of Each Disbursement this Period

473.44

PAC RENT & PHONES

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

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

1016.97

25198.39

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. George Allen for US Senate**

Mailing Address 2819 N Parham Rd Ste 210

City Richmond State VA Zip Code 23294-4425

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**GEORGE ALLEN**

Office Sought:  House  
 Senate  
 President  
State: VA District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : 20615.E2300**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Berg for Senate**

Mailing Address PO Box 9394

City Fargo State ND Zip Code 58106-9394

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**RICHARD A BERG**

Office Sought:  House  
 Senate  
 President  
State: ND District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : 20615.E2299**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Vicki Hartzler for Congress**

Mailing Address PO Box 415004

City Kansas City State MO Zip Code 64141-5004

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**VICKY JO HARTZLER**

Office Sought:  House  
 Senate  
 President  
State: MO District: 04

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : 20615.E2302**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

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

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Hatch Election Committee Inc**

Mailing Address 175 S West Temple Ste 650

City State Zip Code  
Salt Lake City UT 84101-1422

Purpose of Disbursement  
CONTRIBUTION - DEBT RETIREMENT

Candidate Name  
**ORRIN G HATCH**

Office Sought:  House  Senate  President  
State: UT District: 00  
Disbursement For: 2012  
 Primary  General  
 Other (specify) **Convention 2012**

Date of Disbursement

/  /

**Transaction ID : 20507.E2272**

Amount of Each Disbursement this Period

CONTRIBUTION - DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**B. Lamborn for Congress**

Mailing Address PO Box 64107

City State Zip Code  
Colorado Springs CO 80962-4107

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DOUGLAS LAMBORN**

Office Sought:  House  Senate  President  
State: CO District: 05  
Disbursement For: 2012  
 Primary  General  
 Other (specify) **▼**

Date of Disbursement

/  /

**Transaction ID : 20518.E2293**

Amount of Each Disbursement this Period

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Billy Long for Congress**

Mailing Address 1675 E Seminole St Ste F

City State Zip Code  
Springfield MO 65804-2454

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**BILLY LONG**

Office Sought:  House  Senate  President  
State: MO District: 07  
Disbursement For: 2012  
 Primary  General  
 Other (specify) **▼**

Date of Disbursement

/  /

**Transaction ID : 20615.E2301**

Amount of Each Disbursement this Period

CONTRIBUTION

**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 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)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Shays for Senate**

Mailing Address 2103 Main St

City Stratford State CT Zip Code 06615-6300

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**CHRISTOPHER SHAYS**

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

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2012

**Transaction ID : 20518.E2292**

Amount of Each Disbursement this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Team Emerson 96 for Jo Ann Emerson**

Mailing Address PO Box 822

City Cape Girardeau State MO Zip Code 63702-0822

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JO ANN EMERSON**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: MO District: 08

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

**Transaction ID : 20615.E2303**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Ann Wagner for Congress**

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022-0050

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ANN L WAGNER**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: MO District: 02

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2012

**Transaction ID : 20518.E2291**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

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

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Wilson for Senate**

Mailing Address PO Box 10248

City Albuquerque State NM Zip Code 87184-0248

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**HEATHER A WILSON**

Office Sought:  House  
 Senate  
 President  
State: NM District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2012

**Transaction ID : 20615.E2298**

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

43500.00