

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

CastlePAC LLC

ADDRESS (number and street)

PO Box 133

Check if different than previously reported. (ACC)

Wilmington

DE

19899-0133

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C C00254938

3. IS THIS REPORT

X

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)
X 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 01 / 01 / 2013

through

MM / DD / YYYY 06 / 30 / 2013

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 Carl Hostetter

Signature of Treasurer

Carl Hostetter

[Electronically Filed]

Date

MM / DD / YYYY 07 / 10 / 2013

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CastlePAC LLC

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="2013"/>		779528.81
(b) Cash on Hand at Beginning of Reporting Period.....	779528.81	
(c) Total Receipts (from Line 19)	515.11	515.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	780043.92	780043.92
7. Total Disbursements (from Line 31).....	24254.8	24254.8
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	755789.12	755789.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

CastlePAC LLC

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).....	0	0
(ii) Unitemized	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0	0
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	515.11	515.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	515.11	515.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	515.11	515.11

DETAILED SUMMARY PAGE
of Disbursements

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	6454.8	6454.8
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6454.8	6454.8
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000	15000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	2800	2800
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24254.8	24254.8
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24254.8	24254.8

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)	0	0
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	6454.8	6454.8
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	6454.8	6454.8

**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 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 checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CastlePAC LLC

Full Name (Last, First, Middle Initial)
A. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : 35240-44984-m

Amount of Each Receipt this Period **83.42**

Interest Income

Full Name (Last, First, Middle Initial)
B. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2013

Transaction ID : 35240-44994-m

Amount of Each Receipt this Period **80.57**

Interest Income

Full Name (Last, First, Middle Initial)
C. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2013

Transaction ID : 35240-45011-m

Amount of Each Receipt this Period **89.2**

Interest Income

SUBTOTAL of Receipts This Page (optional).....▶	253.19
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 7 OF 21
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CastlePAC LLC

Full Name (Last, First, Middle Initial)
A. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt **04 / 30 / 2013**
Transaction ID : 35240-45019-m

Amount of Each Receipt this Period **86.34**

Interest Income

Full Name (Last, First, Middle Initial)
B. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt **05 / 31 / 2013**
Transaction ID : 35240-45028-m

Amount of Each Receipt this Period **89.22**

Interest Income

Full Name (Last, First, Middle Initial)
C. Manufacturers & Traders Trust Company

Mailing Address One M&T Plaza

City Buffalo	State NY	Zip Code 14203
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.11**

Date of Receipt **06 / 28 / 2013**
Transaction ID : 35240-45033-m

Amount of Each Receipt this Period **86.36**

Interest Income

SUBTOTAL of Receipts This Page (optional).....▶	261.92
TOTAL This Period (last page this line number only).....▶	515.11

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2013

Transaction ID : SB21B-11038-44983-e

Amount of Each Disbursement this Period

150

Full Name (Last, First, Middle Initial)

B. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2013

Transaction ID : SB21B-11038-44991-e

Amount of Each Disbursement this Period

150

Full Name (Last, First, Middle Initial)

C. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2013

Transaction ID : SB21B-11038-45007-e

Amount of Each Disbursement this Period

150

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

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

450.00

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-11038-45018-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-11038-45023-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. 2/3 Mill Road, LLC

Mailing Address 322 A Street
Suite 300

City Wilmington State DE Zip Code 19801-5354

Purpose of Disbursement
Office Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-11038-45032-e

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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Software License

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2013

Transaction ID : SB21B-1659-45009-e

Amount of Each Disbursement this Period

1725

Full Name (Last, First, Middle Initial)

B. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Software License

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2013

Transaction ID : SB21B-1659-45013-e

Amount of Each Disbursement this Period

1725

Full Name (Last, First, Middle Initial)

C. BDO

Mailing Address PO Box 642743

City Pittsburgh State PA Zip Code 15264-2743

Purpose of Disbursement
Tax Preparation

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2013

Transaction ID : SB21B-35233-44996-e

Amount of Each Disbursement this Period

300

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

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

3750.00

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Dick Dubroff Final Focus

Mailing Address PO Box 232

City State Zip Code
Wilmington DE 19899-0232

Purpose of Disbursement
Photography

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-4837-45027-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address 1100 Adams Avenue

City State Zip Code
Norristown PA 19403-2404

Purpose of Disbursement
Payroll Service

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-4992-44979-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. State of Delaware

Mailing Address Department of State
Townsend Building

City State Zip Code
Dover DE 19901

Purpose of Disbursement
State LLC Tax

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-2644-45014-e**

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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-6463-44982-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-6463-44992-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-6463-45008-e

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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2013

Transaction ID : SB21B-6463-45017-e

Amount of Each Disbursement this Period

73.68

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2013

Transaction ID : SB21B-6463-45024-e

Amount of Each Disbursement this Period

83.68

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Broadband Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : SB21B-6463-45029-e

Amount of Each Disbursement this Period

73.68

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

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

231.04

5959.76

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Capito for West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339-1519

Purpose of Disbursement
Political Contribution

011

Candidate Name
Rep. Shelley M. Capito

Category/
Type

Office Sought: House
 Senate
 President
State: WV District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2013

Transaction ID : **SB23-35328-45010-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. Chris Gibson For Congress

Mailing Address PO Box 234

City Saratoga Springs State NY Zip Code 12866-0234

Purpose of Disbursement
Political Contribution

011

Candidate Name
Rep. Christopher P Gibson

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2013

Transaction ID : **SB23-35325-45006-e**

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

C. Chris Gibson For Congress

Mailing Address PO Box 234

City Saratoga Springs State NY Zip Code 12866-0234

Purpose of Disbursement
Void Contribution 3/22/13

011

Candidate Name
Rep. Christopher P Gibson

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2013

Transaction ID : **SB23-35325-45030-e**

Amount of Each Disbursement this Period

-500

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

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

1000.00

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Chris Gibson For Congress

Mailing Address PO Box 234

City State Zip Code
Saratoga Springs NY 12866-0234

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. Christopher P Gibson

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : **SB23-35325-45031-e**

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

B. DLA Piper LLP (US) PAC (DLA Piper PAC)

Mailing Address 500 8th Street NW
Suite 700

City State Zip Code
Washington DC 20004-2131

Purpose of Disbursement
Political Contribution

011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : **SB23-32249-45001-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

C. Friends Of Jack Kingston

Mailing Address PO Box 2133

City State Zip Code
Savannah GA 31402-2133

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. Jack Kingston

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2013

Transaction ID : **SB23-34946-45025-e**

Amount of Each Disbursement this Period

1000

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

6500.00

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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Friends Of Jim Inhofe Committee

Mailing Address PO Box 13300

City Oklahoma City State OK Zip Code 73113-1300

Purpose of Disbursement
Political Contribution

011

Candidate Name

Senator James M. Inhofe

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OK District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2013

Transaction ID : SB23-32144-44989-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

B. Friends Of Pat Toomey

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Political Contribution

011

Candidate Name

Senator Patrick Joseph Toomey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2013

Transaction ID : SB23-35333-45020-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. Hatch Election Committee Inc

Mailing Address 175 S West Temple
Suite 650

City Salt Lake Cty State UT Zip Code 84101-1422

Purpose of Disbursement
Political Contribution

011

Candidate Name

Senator Orrin G. Hatch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: UT District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2013

Transaction ID : SB23-32148-44990-e

Amount of Each Disbursement this Period

500

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

2000.00

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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Kirk For Senate

Mailing Address PO Box 8

City Winnetka State IL Zip Code 60093-0008

Purpose of Disbursement
Political Contribution

011

Candidate Name

Senator Mark Steven Kirk

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	3

Transaction ID : SB23-35335-45021-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
									1000

Full Name (Last, First, Middle Initial)

B. Kovach for Congress, Inc.

Mailing Address PO Box 30498

City Wilmington State DE Zip Code 19805-7498

Purpose of Disbursement
Political Contribution

011

Candidate Name

Mr. Thomas H. Kovach

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Retire Debt - P2012

State: DE District:

Date of Disbursement

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

Transaction ID : SB23-35255-44986-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
									1000

Full Name (Last, First, Middle Initial)

C. Republican Mainstreet Partnership PAC

Mailing Address 2201 Wisconsin Avenue NW
Suite 320

City Washington State DC Zip Code 20007-4105

Purpose of Disbursement
Political Contribution

011

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
0	3		2	2		2	0	1	3

Transaction ID : SB23-9439-45002-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
									1000

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

3	0	0	0	0	0	0	0	0	0
									3000.00

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

1	0	0	0	0	0	0	0	0	0
									3000.00

**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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Republican Mainstreet Partnership PAC

Mailing Address 2201 Wisconsin Avenue NW
Suite 320

City Washington State DC Zip Code 20007-4105

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-9439-45026-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Republican State Committee of Delaware

Mailing Address 3301 Lancaster Pike
Suite 4B

City Wilmington State DE Zip Code 19805-1436

Purpose of Disbursement
Political Contribution

Candidate Name

Republican State Committee of Delaware

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-1061-45012-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407-5305

Purpose of Disbursement
Political Contribution

Candidate Name

Senator Timothy Scott

Office Sought: House
 Senate
 President
State: SC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-35323-44988-e

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 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)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Walden For Congress

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031-0037

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Rep. Gregory P. Walden

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2013

Transaction ID : SB23-35321-44987-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Disbursement this Period

--

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

--

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

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

1000.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Friends of Tom Wagner

Mailing Address 141 Hazel Road

City Dover State DE Zip Code 19901-3815

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Auditor Tom Wagner

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2013

Transaction ID : **SB29-10991-45005-e**

Amount of Each Disbursement this Period

1200

Full Name (Last, First, Middle Initial)

B. Joe Lhota For Mayor, Inc.

Mailing Address 132 E 43rd Street

City New York State NY Zip Code 10017-4019

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Mr. Joe Lhota

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2013

Transaction ID : **SB29-35336-45022-e**

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

C. Lopez for Senate

Mailing Address PO Box 354

City Nassau State DE Zip Code 19969-0354

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Mr. Ernesto Lopez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2013

Transaction ID : **SB29-35275-45004-e**

Amount of Each Disbursement this Period

600

(For State/Local Candidate Support)

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

2300.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CastlePAC LLC

Full Name (Last, First, Middle Initial)

A. Republican Governors Association

Mailing Address 1747 Pennsylvania Avenue NW
Suite 250

City Washington State DC Zip Code 20006-4643

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-35326-45003-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

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

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

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

/ /

Amount of Each Disbursement this Period

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

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