

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.
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)
Check if different than previously reported. (ACC) WASHINGTON DC 20001

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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. Paul Tripodi

Signature of Treasurer *Mr. Paul Tripodi* [Electronically Filed] Date / /

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)

Write or Type Committee Name

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

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"/>		48079.92
(b) Cash on Hand at Beginning of Reporting Period.....	84843.17	
(c) Total Receipts (from Line 19)	1044.00	107697.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	85887.17	155777.17
7. Total Disbursements (from Line 31).....	12716.54	82606.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	73170.63	73170.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

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).....	720.00	77115.00
(ii) Unitemized	324.00	30582.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1044.00	107697.25
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1044.00	107697.25
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))..... ▶	1044.00	107697.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1044.00	107697.25

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	23000.00
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	150.00
(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	150.00
29. Other Disbursements	5716.54	59456.54
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)) ..	12716.54	82606.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12716.54	82606.54

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)	1044.00	107697.25
34. Total Contribution Refunds (from Line 28(d))	0.00	150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1044.00	107547.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Mrs. Phyllis Bigbee

Mailing Address 1936 Myers Rd

City Broken Bow State NE Zip Code 68822-4214

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 12 / 11 / 2013
Transaction ID : SA11AI.22308

Amount of Each Receipt this Period
 70.00

Full Name (Last, First, Middle Initial)
B. Mr. Frank Cope

Mailing Address 108 Park Dr

City Pueblo State CO Zip Code 81005-1166

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

Name of Employer Self Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 12 / 02 / 2013
Transaction ID : SA11AI.22296

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Mr. Scott Hassler

Mailing Address 21 Tarleton Ln

City Ladera Ranch State CA Zip Code 92694-1303

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

Name of Employer KPI Occupation Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 12 / 16 / 2013
Transaction ID : SA11AI.22306

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 7 OF 14
<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)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A. Mr. Talbert Hughes
Full Name (Last, First, Middle Initial)

Mailing Address 7224 Panorama Dr

City Derwood State MD Zip Code 20855-1939

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

Name of Employer Occupation
Info requested per best effort Info requested per best efforts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 11 / 2013
Transaction ID : SA11AI.22307

Amount of Each Receipt this Period
25.00

B. Dr. Roger Loven
Full Name (Last, First, Middle Initial)

Mailing Address 925 English Oak Dr

City Bismarck State ND Zip Code 58501-9333

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

Name of Employer Occupation
St. Alexius Medical Center Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 06 / 2013
Transaction ID : SA11AI.22297

Amount of Each Receipt this Period
50.00

C. Mr. David Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 11211 Patridge Dr

City Houston State TX Zip Code 77070-1326

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

Name of Employer Occupation
Locke Lord Bissell & Liddell Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
12 / 06 / 2013
Transaction ID : SA11AI.22298

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 8 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A. Mr. Timothy Tynes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1745 42nd Sq
 Apt 104
 City Vero Beach State FL Zip Code 32960-0595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Info requested per best effort Info requested per best efforts
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : SA11AI.22295
 Amount of Each Receipt this Period
 250.00

B. Linda Wade
 Full Name (Last, First, Middle Initial)
 Mailing Address 20796A Meadowbrook Dr
 City Abingdon State VA Zip Code 24211-5598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2013
Transaction ID : SA11AI.22304
 Amount of Each Receipt this Period
 25.00

C. Mrs. Georgia Wiester
 Full Name (Last, First, Middle Initial)
 Mailing Address 7760 Santa Rosa Rd
 City Buellton State CA Zip Code 93427-9421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : SA11AI.22294
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	720.00

**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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BOBBY SCHILLING FOR CONGRESS

Mailing Address 367 AVENUE OF THE CITIES SUITE D

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement
Contribution

011

Candidate Name

ROBERT T. SCHILLING

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2013			

Transaction ID : SB23.22319

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOUDERMILK FOR CONGRESS

Mailing Address PO BOX 447

City CASSVILLE State GA Zip Code 30123

Purpose of Disbursement
Contribution

011

Candidate Name

BARRY LOUDERMILK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2013			

Transaction ID : SB23.22317

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. MOONEY FOR CONGRESS

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
Contribution

011

Candidate Name

ALEXANDER XAVIER MR MOONEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2013			

Transaction ID : SB23.22320

Amount of Each Disbursement this Period

1000.00

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

6000.00

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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement
Contribution

011

Candidate Name

WILLIAM STEVE II SOUTHERLAND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 16 / 2013

Transaction ID : SB23.22318

Amount of Each Disbursement this Period

1000.00

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 / 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 / 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)..... ▶

1000.00

7000.00

**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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Reimbursement of transportation expense to nonfederal event

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22321

Amount of Each Disbursement this Period

1841.03

Full Name (Last, First, Middle Initial)

B. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Reimbursement of travel expense to nonfederal event

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22323

Amount of Each Disbursement this Period

194.36

Full Name (Last, First, Middle Initial)

C. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Reimbursement of travel expense to nonfederal event

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22324

Amount of Each Disbursement this Period

134.83

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

2170.22

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

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

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

FOR LINE NUMBER:
(check only one)

<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)

FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Non-federal expense requiring reimbursement per state law

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22325

Amount of Each Disbursement this Period

2744.62

Full Name (Last, First, Middle Initial)

B. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Reimbursement of travel expense to nonfederal event

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22327

Amount of Each Disbursement this Period

101.70

Full Name (Last, First, Middle Initial)

C. Family Research Council Action

Mailing Address 801 G Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Reimbursement of travel expense to nonfederal event

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB29.22328

Amount of Each Disbursement this Period

700.00

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

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

3546.32

5716.54

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Staff travel to non-federal event
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="1841.03"/>	Transaction ID : SD10.22292	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1841.03"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Staff travel to non-federal event
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="194.36"/>	Transaction ID : SD10.22289	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="194.36"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Staff travel for non-federal event
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="134.83"/>	Transaction ID : SD10.22287	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="134.83"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Staff travel to non-federal event
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="101.70"/>	Transaction ID : SD10.22288	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="101.70"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Staff travel to non-federal event
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="700.00"/>	Transaction ID : SD10.22290	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="700.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Family Research Council Action	Nature of Debt (Purpose): Non-federal expense requiring reimbursement pursuant to state law
Mailing Address 801 G Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="2744.62"/>	Transaction ID : SD10.22286	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2744.62"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>