

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CAP PAC

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"/>	<input type="text" value="4902.65"/>	<input type="text" value="4902.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1661.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10500.00"/>	<input type="text" value="46000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12161.68"/>	<input type="text" value="50902.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9283.00"/>	<input type="text" value="48023.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2878.68"/>	<input type="text" value="2878.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

CAP PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10500.00	46000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10500.00	46000.00
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))..... ▶	10500.00	46000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10500.00	46000.00

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	283.00	3023.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	283.00	3023.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	40000.00
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	5000.00
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)) ..	9283.00	48023.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9283.00	48023.97

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)	10500.00	46000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10500.00	46000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	283.00	3023.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	283.00	3023.97

**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 11
<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

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)
CAP PAC

A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 H STREET NW SUITE 1200
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00105981
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00
 Date of Receipt 10 / 04 / 2012
Transaction ID : SA11C.5058
 Amount of Each Receipt this Period 2000.00

B. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 H STREET NW SUITE 1200
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00105981
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00
 Date of Receipt 10 / 04 / 2012
Transaction ID : SA11C.5059
 Amount of Each Receipt this Period 1000.00

C. JPMORGAN CHASE & CO. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 S. DEARBORN ST IL 1-0520
 City CHICAGO State IL Zip Code 60603
 FEC ID number of contributing federal political committee. **C** C00128512
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00
 Date of Receipt 10 / 04 / 2012
Transaction ID : SA11C.5060
 Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 11
<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)
CAP PAC

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11C.5076

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

Mailing Address 751 Broad Street
14th Floor

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

Transaction ID : SA11C.5048

Amount of Each Receipt this Period
2500.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	10500.00

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)
CAP PAC

Full Name (Last, First, Middle Initial)

A. Evans & Katz LLC

Mailing Address 1831 Bay St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SB21B.5065

Amount of Each Disbursement this Period

268.00

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

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

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

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)..... ▶

268.00

268.00

**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)
CAP PAC

Full Name (Last, First, Middle Initial) A. BOSWELL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 19 / 2012
Mailing Address PO Box 6220		Transaction ID : SB23.5075
City Des Moines	State IA	
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name LEONARD L. BOSWELL	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IA District: 03	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN BARROW		Date of Disbursement MM / DD / YYYY 10 / 29 / 2012
Mailing Address PO Box 8166		Transaction ID : SB23.5063
City Savannah	State GA	
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name JOHN J BARROW	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: GA District: 12	

Full Name (Last, First, Middle Initial) C. LAMPSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2012
Mailing Address P.O. Box 58606		Transaction ID : SB23.5067
City Houston	State TX	
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name NICHOLAS V LAMPSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: TX District: 22	

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

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

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)
CAP PAC

Full Name (Last, First, Middle Initial)

A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Date of Disbursement

Mailing Address P.O. BOX 730

M M M	/	D D D	/	Y Y Y Y Y
10		23		2012

City State Zip Code
HONEYE NY 14471

Transaction ID : SB23.5068

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

LOUISE M SLAUGHTER

Category/
Type

1000.00

Office Sought: House
 Senate
 President
State: NY District: 25

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. MARK CRITZ FOR CONGRESS COMMITTEE

Date of Disbursement

Mailing Address 551 MAIN STREET SUITE 120

M M M	/	D D D	/	Y Y Y Y Y
10		19		2012

City State Zip Code
JOHNSTOWN PA 15901

Transaction ID : SB23.5074

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

MARK CRITZ

Category/
Type

1000.00

Office Sought: House
 Senate
 President
State: PA District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. MCDOWELL FOR CONGRESS

Date of Disbursement

Mailing Address 10820 GLEN STREET

M M M	/	D D D	/	Y Y Y Y Y
10		23		2012

City State Zip Code
RUDYARD MI 49780

Transaction ID : SB23.5071

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

GARY J. MCDOWELL

Category/
Type

1000.00

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
CAP PAC

Full Name (Last, First, Middle Initial)

A. PASCRELL FOR CONGRESS

Mailing Address P.O. BOX 640

City State Zip Code
TOTOWA NJ 07511

Purpose of Disbursement
Contribution

Candidate Name

Hon. WILLIAM J. PASCRELL Jr.

Office Sought: House
 Senate
 President
State: NJ District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.5064

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TIERNEY FOR CONGRESS COMMITTEE

Mailing Address 7 LOMAS DRIVE

City State Zip Code
FRAMINGHAM MA 01701

Purpose of Disbursement
Contribution

Candidate Name

JOHN F TIERNEY

Office Sought: House
 Senate
 President
State: MA District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.5062

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City State Zip Code
Farmingville NY 11738

Purpose of Disbursement
Contribution

Candidate Name

TIMOTHY BISHOP

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2012

Transaction ID : SB23.5066

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

9000.00
