

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

WESTERN REPRESENTATION PAC

ADDRESS (number and street) 5549 KNOLL VIEW WAY

Check if different than previously reported. (ACC) SPARKS NV 89436

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00461772

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 Quarterly 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 08 01 2010 through 08 31 2010

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 Roger Stockton

Signature of Treasurer Electronically Filed by Roger Stockton Date 09 13 2010

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

Table with 8 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
WESTERN REPRESENTATION PAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		1317.58
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	31273.17									
(c) Total Receipts (from Line 19) .....	59664.25	102674.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	90937.42	103992.32								
7. Total Disbursements (from Line 31) .....	30607.27	43662.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	60330.15	60330.15								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
WESTERN REPRESENTATION PAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	12270.00	16620.00
(ii) Unitemized .....	47394.25	86019.34
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	59664.25	102639.34
(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) .....	59664.25	102639.34
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	35.40
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 Transfer (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)) .....	59664.25	102674.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	59664.25	102674.74

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	14635.42	23260.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	14635.42	23260.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	5600.00
24. Independent Expenditure (use Schedule E) .....	10471.85	14801.85
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	30607.27	43662.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30607.27	43662.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	59664.25	102639.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59664.25	102639.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14635.42	23260.32
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	35.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14635.42	23224.92

**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 / 29
	<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)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard Ainsworth

Mailing Address 19 Bondi way

City Reisterstown State MD Zip Code 21136

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

Name of Employer self Occupation health care/assisted living

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2010

Transaction ID: SA11AI.11274

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Boyd

Mailing Address 101 Conestoga Drive

City Carson City State NV Zip Code 89706

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

Name of Employer self Occupation self

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 06 / 2010

Transaction ID: SA11AI.11082

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Shelley Budig

Mailing Address 5304 silver spurs ln

City spokane State WA Zip Code 99217

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

Name of Employer NA Occupation NA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2010

Transaction ID: SA11AI.9246

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

**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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 7 / 29
	<input checked="" 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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Arno Chauvel	Date of Receipt MM / DD / YYYY 08 / 10 / 2010
	Mailing Address 444 Alta Vista way	<b>Transaction ID:</b> SA11AI.9303
	City State Zip Code Laguna Beach CA 92651	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer self Occupation pharmacist	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Arno Chauvel	Date of Receipt MM / DD / YYYY 08 / 17 / 2010
	Mailing Address 444 Alta Vista way	<b>Transaction ID:</b> SA11AI.10275
	City State Zip Code Laguna Beach CA 92651	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer self Occupation pharmacist	Aggregate Year-to-Date ▼ 575.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Arno Chauvel	Date of Receipt MM / DD / YYYY 08 / 23 / 2010
	Mailing Address 444 Alta Vista way	<b>Transaction ID:</b> SA11AI.9930
	City State Zip Code Laguna Beach CA 92651	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer self Occupation pharmacist	Aggregate Year-to-Date ▼ 625.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<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 / 29
	<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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kim Conant	Date of Receipt MM / DD / YYYY 08 / 14 / 2010
	Mailing Address 14735 Poway Mesa Dr.	<b>Transaction ID:</b> SA11AI.10485
	City State Zip Code Poway CA 92064	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer PUSD Occupation Ret. Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kim Conant	Date of Receipt MM / DD / YYYY 08 / 23 / 2010
	Mailing Address 14735 Poway Mesa Dr.	<b>Transaction ID:</b> SA11AI.9921
	City State Zip Code Poway CA 92064	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer PUSD Occupation Ret. Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Steven DeCasperis	Date of Receipt MM / DD / YYYY 08 / 17 / 2010
	Mailing Address 99 Garyrock Road	<b>Transaction ID:</b> SA11AI.10322
	City State Zip Code Clinton NJ 08809	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation dentist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<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 9 / 29
	<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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mike Delgado		Date of Receipt
	Mailing Address 14673-A		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 27 / 2010
	City	State	Zip Code
	Mountain View	CA	94035
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8770
Name of Employer Self		Occupation Electrical Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 220.00

<b>B.</b>	Full Name (Last, First, Middle Initial) James Edwards		Date of Receipt
	Mailing Address 801 South Garner Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 19 / 2010
	City	State	Zip Code
	State College	PA	16801
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8941
Name of Employer Clearfield Hospital		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 100.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Vivian Faulkner		Date of Receipt
	Mailing Address 19979 N Golden Barrel Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 27 / 2010
	City	State	Zip Code
	Surprise	AZ	85374
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.9770
Name of Employer NA		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 420.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 29  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Frost

Mailing Address PO Box 271

City State Zip Code  
Mexia TX 76667

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

Name of Employer Occupation  
Frost Crushed Stone Rock Crushing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2010

Transaction ID: SA11AI.11245

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Jon Gibson

Mailing Address 2976 Alhambra Drive

City State Zip Code  
Cameron Park CA 95682

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

Name of Employer Occupation  
JGC Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2010

Transaction ID: SA11AI.10554

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Gloria Gill

Mailing Address 767 Rocky Branch Lane

City State Zip Code  
Evans GA 30809

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

Name of Employer Occupation  
Club Car Editor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2010

Transaction ID: SA11AI.10659

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 29  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ralph Goehring

Mailing Address 10900 Rockridge Way

City State Zip Code  
Bakersfield CA 93311

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

Name of Employer Self Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: SA11AI.9891

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Hawley

Mailing Address 6301 Stevenson Ave #1313

City State Zip Code  
Alexandria VA 22304

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

Name of Employer NA Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: SA11AI.10418

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Ronald Hawley

Mailing Address 6301 Stevenson Ave #1313

City State Zip Code  
Alexandria VA 22304

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

Name of Employer NA Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2010

Transaction ID: SA11AI.10241

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **325.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 29  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Hawley

Mailing Address 6301 Stevenson Ave  
#1313

City State Zip Code  
Alexandria VA 22304

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

Name of Employer NA Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2010

Transaction ID: SA11AI.9963

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Lee Holmes

Mailing Address 530 W. O'Brien Dr.

City State Zip Code  
Hagatna GU 96910

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

Name of Employer Southern Media, Inc. Occupation manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2010

Transaction ID: SA11AI.10916

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Jane Honett

Mailing Address 345 Adams Way

City State Zip Code  
Pleasanton CA 94566

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

Name of Employer Valleycare Hospital Occupation personal trainer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

Transaction ID: SA11AI.9862

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1550.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 29  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Hughes

Mailing Address 2005 Fern Hill Ct.

City Henderson State NV Zip Code 89252

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

Name of Employer Glass Supply, Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2010  
Transaction ID: SA11AI.10363  
Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Cherie Humphreys

Mailing Address Po box 11615

City Reno State NV Zip Code 89510

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

Name of Employer AnswerWest Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2010  
Transaction ID: SA11AI.9481  
Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer Kelly

Mailing Address 1006 Christopher Lane

City Pasco State WA Zip Code 99301

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

Name of Employer J & J Kelly Construction, Inc. Occupation GC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2010  
Transaction ID: SA11AI.10840  
Amount of Each Receipt this Period 250.00

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

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

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

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

FOR LINE NUMBER: PAGE 14 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.** Full Name (Last, First, Middle Initial)  
Jennifer Kelly  
Mailing Address 1006 Christopher Lane  
City Pasco State WA Zip Code 99301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer J & J Kelly Construction, Inc. Occupation GC  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 08 / 19 / 2010  
Transaction ID: SA11AI.10125  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph Kolman  
Mailing Address 125 Lake St  
City White Plains State NY Zip Code 10604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NA Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 08 / 27 / 2010  
Transaction ID: SA11AI.9835  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mariette Landwehr  
Mailing Address 201 W. Lakeshore Dr.  
City Carriere State MS Zip Code 39426  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 08 / 01 / 2010  
Transaction ID: SA11AI.11240  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00  
**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 15 / 29
	<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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mariette Landwehr		Date of Receipt
	Mailing Address 201 W. Lakeshore Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 17 / 2010
	City	State	Zip Code
	Carriere	MS	39426
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.10311
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 50.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Joyce Luchtman		Date of Receipt
	Mailing Address 3754 Kentford Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 19 / 2010
	City	State	Zip Code
	Fort Collins	CO	80525
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.8926
Name of Employer NA		Occupation NA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 200.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Matthews		Date of Receipt
	Mailing Address 4876 Patrick Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 09 / 2010
	City	State	Zip Code
	Winnsboro	SC	29180
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.10791
Name of Employer Montgomery & Yarbrough		Occupation CPA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	<input type="text"/> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 16 / 29
	<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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Matthews		Date of Receipt	
	Mailing Address 4876 Patrick Rd		M M / D D / Y Y Y Y Y 08 / 16 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.9036
	Winnsboro	SC	29180	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer Montgomery & Yarbrough		Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Malcolm Moody		Date of Receipt	
	Mailing Address 703 North Jackson Street		M M / D D / Y Y Y Y Y 08 / 18 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10230
	Starkville	MS	39759	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer Mac of all Trades		Occupation owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Rohde		Date of Receipt	
	Mailing Address 4087 Brockton		M M / D D / Y Y Y Y Y 08 / 13 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.9152
	Kentwood	MI	49512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
Name of Employer Rohde Construction		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<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 17 / 29  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
John Ross

Mailing Address P.O. Box 18718

City State Zip Code  
Reno NV 89511

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2010

Transaction ID: SA11AI.9457

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Irwin Samelman

Mailing Address 89 Princeville Ln

City State Zip Code  
Las Vegas NV 89113

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

Name of Employer Occupation  
na retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: SA11AI.9782

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Margaret Savercool

Mailing Address 6375 Pebble Creek Drive

City State Zip Code  
Independence OH 44131

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2010

Transaction ID: SA11AI.10330

Amount of Each Receipt this Period  
1000.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 29
	<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)  
WESTERN REPRESENTATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol Schmucker	Date of Receipt MM / DD / YYYY 08 / 28 / 2010
	Mailing Address 116 Deer Tract CT	<b>Transaction ID:</b> SA11AI.9710
	City State Zip Code Warner Robins GA 31088	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NA	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Schnorbus	Date of Receipt MM / DD / YYYY 08 / 22 / 2010
	Mailing Address 1227 Melborn Way	<b>Transaction ID:</b> SA11AI.9985
	City State Zip Code Minden NV 89423	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Gas Corp	Occupation Gas Utility specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Martha Shelley	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 1149 Wiley Branch Rd.	<b>Transaction ID:</b> SA11AI.8922
	City State Zip Code Tifton GA 31794	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<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 19 / 29
	<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)  
**WESTERN REPRESENTATION PAC**

**A.** Full Name (Last, First, Middle Initial)  
Edith Slavic

Mailing Address 10308 La Reina Road

City State Zip Code  
Delray Beach FL 33446

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

Name of Employer NA Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 30 / 2010  
Transaction ID: SA11AI.8723  
Amount of Each Receipt this Period: 1000.00

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

Mailing Address 2563 Willowbrook Circle

City State Zip Code  
Birmingham AL 35242

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

Name of Employer NA Occupation NA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 20 / 2010  
Transaction ID: SA11AI.10065  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 715 Lands End Drive

City State Zip Code  
Longboat Key FL 34228

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

Name of Employer NA Occupation homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 13 / 2010  
Transaction ID: SA11AI.10683  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 29
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WESTERN REPRESENTATION PAC

**A.**

Full Name (Last, First, Middle Initial) Lucia Uihlein		Date of Receipt MM / DD / YYYY 08 / 19 / 2010
Mailing Address 715 Lands End Drive		<b>Transaction ID:</b> SA11AI.10176
City Longboat Key	State FL	Zip Code 34228
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer NA	Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Carol Wilson		Date of Receipt MM / DD / YYYY 08 / 08 / 2010
Mailing Address 2197 Sutter View Lane		<b>Transaction ID:</b> SA11AI.9364
City Lincoln	State CA	Zip Code 95648
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	12270.00

# 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)  
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Blue Swarm LLC	Transaction ID: SB21B.8686
	Mailing Address 70 Broadway	Date of Disbursement 08 / 15 / 2010
	City Westford State MA Zip Code 01886	Amount of Each Disbursement this Period 967.93
	Purpose of Disbursement web donation collection fees Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blue Swarm LLC	Transaction ID: SB21B.11316
	Mailing Address 70 Broadway	Date of Disbursement 08 / 31 / 2010
	City Westford State MA Zip Code 01886	Amount of Each Disbursement this Period 1037.67
	Purpose of Disbursement web donation collection fees Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dionysus Consulting LLC	Transaction ID: SB21B.8676
	Mailing Address 645 Alwick Ave	Date of Disbursement 08 / 25 / 2010
	City West Islip State NY Zip Code 11795	Amount of Each Disbursement this Period 8000.00
	Purpose of Disbursement Email support drive Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10005.60
<b>TOTAL</b> 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)

PAGE 22 / 29

<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)  
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Facebook	Transaction ID: SB21B.8698 Date of Disbursement
	Mailing Address 1601 South California Avenue	<input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Palo Alto State CA Zip Code 94304	Amount of Each Disbursement this Period
	Purpose of Disbursement Supporter drive ad	<input type="text" value="828.32"/>
	Candidate Name	<input type="text" value="004"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Innovative Networks Inc	Transaction ID: SB21B.8699 Date of Disbursement
	Mailing Address 1811 Newman Pl	<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Carson City State NV Zip Code 89703	Amount of Each Disbursement this Period
	Purpose of Disbursement Website development	<input type="text" value="826.59"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paramount Communications Group	Transaction ID: SB21B.8693 Date of Disbursement
	Mailing Address 525-K East Market St #114	<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Leesburg State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement Email service	<input type="text" value="658.80"/>
	Candidate Name	<input type="text" value="003"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2313.71"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

PAGE 23 / 29

<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

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)  
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)  
Dustin Stockton

Mailing Address 5549 Knoll View Way

City Sparks State NV Zip Code 89436

Purpose of Disbursement  
Travel Per Diem - Alaska camapaign

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8689

Date of Disbursement

08 / 21 / 2010

Amount of Each Disbursement this Period

2000.00

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

2000.00

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

14319.31

**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)  
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)  
JOHN DENNIS

Mailing Address 1592 UNION STREET

City State Zip Code  
SAN FRANCISCO CA 94123

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
JOHN DENNIS

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

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.8691  
Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
FRIENDS OF SHARRON ANGLE

Mailing Address PO BOX 33058

City State Zip Code  
RENO NV 89533

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
SHARRON E ANGLE

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

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.8680  
Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)  
OUR COUNTRY DESERVES BETTER PAC - TEAPARTYEXPRESS.ORG

Mailing Address 30151 Tomas

City State Zip Code  
RnchoStaMargarita CA 92688

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.8672  
Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

5500.00



# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
99.1 FM Talk

---

Mailing Address  
1960 Idaho St

---

City	State	Zip Code
Carson City	NV	89701

---

Purpose of Expenditure	Category/ Type
	004

---

Name of Federal Candidate supported or Opposed by expenditure:  
SHARRON E ANGLE

---

Calendar Year-To-Date Per Election for Office Sought	5950.00
---	---------

Date  
MM / DD / YYYY  
08 / 10 / 2010

Amount  
220.00

Transaction ID: SE.8694

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
CBS Radio - NEWSRADIO 840 KXNT

---

Mailing Address  
6655 W. Sahara Ave. Suite D-110

---

City	State	Zip Code
Las Vegas	NV	89146

---

Purpose of Expenditure KNXT banner ad	Category/ Type
	004

---

Name of Federal Candidate supported or Opposed by expenditure:  
SHARRON E ANGLE

---

Calendar Year-To-Date Per Election for Office Sought	5730.00
---	---------

Date  
MM / DD / YYYY  
08 / 06 / 2010

Amount  
2000.00

Transaction ID: SE.8700

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	2220.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton  
Signature

Date MM / DD / YYYY  
09 / 13 / 2010

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
CBS Radio - NEWSRADIO 840 KXNT

Mailing Address  
6655 W. Sahara Ave. Suite D-110

City State Zip Code  
Las Vegas NV 89146

Purpose of Expenditure Category/Type  
Radio ad 004

Name of Federal Candidate supported or Opposed by expenditure:  
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought 7875.00

Date  
MM / DD / YYYY  
08 / 19 / 2010

Amount  
1800.00

Transaction ID: SE.8692

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
CBS Radio - NEWSRADIO 840 KXNT

Mailing Address  
6655 W. Sahara Ave. Suite D-110

City State Zip Code  
Las Vegas NV 89146

Purpose of Expenditure Category/Type  
Radio ad 004

Name of Federal Candidate supported or Opposed by expenditure:  
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought 10975.00

Date  
MM / DD / YYYY  
08 / 23 / 2010

Amount  
3000.00

Transaction ID: SE.8690

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	4800.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton  
Signature

Date MM / DD / YYYY  
09 / 13 / 2010

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
KFQD Radio

Mailing Address  
800 E Diamond Blvd 3-370

City State Zip Code  
Anchorage AK 99515

Purpose of Expenditure Category/Type  
radio ad 004

Name of Federal Candidate supported or Opposed by expenditure:  
JOSEPH W MILLER

Calendar Year-To-Date Per Election for Office Sought 2185.10

Date  
MM / DD / YYYY  
08 / 21 / 2010

Amount  
637.50

Transaction ID: SE.8615

Office Sought:  House State: AK  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
KJNO Radio

Mailing Address  
3161 Channel Dr

City State Zip Code  
Juneau AK 99801

Purpose of Expenditure Category/Type  
radio ad 004

Name of Federal Candidate supported or Opposed by expenditure:  
JOSEPH W MILLER

Calendar Year-To-Date Per Election for Office Sought 1547.60

Date  
MM / DD / YYYY  
08 / 21 / 2010

Amount  
1547.60

Transaction ID: SE.8613

Office Sought:  House State: AK  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2185.10
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton  
Signature

Date MM / DD / YYYY  
09 / 13 / 2010

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Nevada Newsmakers

Mailing Address  
P.O. Box 10853

City State Zip Code  
Reno NV 89510

Purpose of Expenditure Category/Type  
Radio Ad 004

Name of Federal Candidate supported or Opposed by expenditure:  
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought 6075.00

Date  
MM / DD / YYYY  
08 / 19 / 2010

Amount  
125.00

Transaction ID: SE.8678

Office Sought:  House State: NV  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Scott Fortney, TakeMyVoice.com

Mailing Address  
6960 Huntingdon Street

City State Zip Code  
Harrisburg PA 17111

Purpose of Expenditure Category/Type  
ad production 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mark Amodei

Calendar Year-To-Date Per Election for Office Sought 7975.00

Date  
MM / DD / YYYY  
08 / 21 / 2010

Amount  
100.00

Transaction ID: SE.8688

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	225.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton  
Signature

Date MM / DD / YYYY  
09 / 13 / 2010

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee Spirit of Alaska Broadcasting		Date M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 1 0
Mailing Address 220 E. Parks Hwy		Amount 1041.75
City State Zip Code Wasilla AK 99654		Transaction ID: SE.8671
Purpose of Expenditure Radio ad supporting Joe Miller		Office Sought: <input type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: JOSEPH W MILLER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3226.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	1041.75
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	10471.85
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Roger Stockton Signature	Date M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0