

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

NEW PAC

ADDRESS (number and street) P.O. BOX 7480 VISALIA CA 93290

2. FEC IDENTIFICATION NUMBER C00398750 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 01 2009 through 06 30 2009

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 Toni Dian Nunes

Signature of Treasurer Electronically Filed by Toni Dian Nunes Date 07 29 2009

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 7 columns and 1 row. Office Use Only. FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		46353.42
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	46353.42									
(c) Total Receipts (from Line 19)	86500.00	86500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	132853.42	132853.42								
7. Total Disbursements (from Line 31)	71996.90	71996.90								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	60856.52	60856.52								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	16500.00	16500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16500.00	16500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	70000.00	70000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	86500.00	86500.00
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 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))	86500.00	86500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	86500.00	86500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	39996.90	39996.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	39996.90	39996.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	29000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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.....	3000.00	3000.00
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))..	71996.90	71996.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71996.90	71996.90

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)	86500.00	86500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86500.00	86500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	39996.90	39996.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39996.90	39996.90

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

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

FOR LINE NUMBER: PAGE 6 / 33
(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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
BARONA BAND OF MISSION INDIANS
 Mailing Address **1095 BARONA RD**
 City **LAKESIDE** State **CA** Zip Code **92040**
 Date of Receipt MM / DD / YYYY
06 / 03 / 2009
Transaction ID: SA11AI.6252
 Amount of Each Receipt this Period
2500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

B. Full Name (Last, First, Middle Initial)
JORDAN MAZZETTA
 Mailing Address **811 JUDSON AVE**
 City **HIGHLAND PARK** State **IL** Zip Code **60035**
 Date of Receipt MM / DD / YYYY
06 / 03 / 2009
Transaction ID: SA11AI.6245
 Amount of Each Receipt this Period
500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
MAZZETTA COMPANY **PARTNER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
THOMAS J MAZZETTA
 Mailing Address **1990 SAINT JOHNS AVE**
 City **HIGHLAND PARK** State **IL** Zip Code **60035**
 Date of Receipt MM / DD / YYYY
06 / 03 / 2009
Transaction ID: SA11AI.6247
 Amount of Each Receipt this Period
1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
MAZZETTA COMPANY **CEO**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) 4000.00

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 7 / 33
(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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ZACHARY D MAZZETTA

Mailing Address 811 JUDSON AVE

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
MAZZETTA COMPANY PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2009

Transaction ID: SA11AI.6248

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MORONGO BAND OF MISSION INDIANS

Mailing Address P.O. BOX 366

City State Zip Code
CABAZON CA 92230

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2009

Transaction ID: SA11AI.6258

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
SANTA YNEZ BAND OF MISSION INDIANS

Mailing Address P.O. BOX 517

City State Zip Code
SANTA YNEZ CA 93460

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2009

Transaction ID: SA11AI.6235

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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 / 33
	<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) MICHAEL D THOMPSON		Date of Receipt MM / DD / YYYY 06 / 25 / 2009
	Mailing Address 6517 PRINCETON DR		Transaction ID: SA11AI.6342
	City ALEXANDRIA	State VA	Zip Code 22307
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer RICH FEUER GROUP	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) TULE RIVER TRIBAL COUNCIL		Date of Receipt MM / DD / YYYY 06 / 03 / 2009
	Mailing Address P.O. BOX 589		Transaction ID: SA11AI.6244
	City PORTERVILLE	State CA	Zip Code 93258
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
	Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) FRANK VITELLO		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 309 YOAKUM PKWY, STE 1418		Transaction ID: SA11AI.6250
	City ALEZANDRIA	State VA	Zip Code 22304
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer VITELLO CONSULTING	Occupation SELF EMPLOYED - CONSULTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	16500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 33
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 Abbott Park Rd.
D312 AP6D-2

City State Zip Code
Abbott Park IL 60064

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2009

Transaction ID: SA11C.6259

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW
Suite 400W

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2009

Transaction ID: SA11C.6257

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address 1101 17 Street N.W. Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2009

Transaction ID: SA11C.6344

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 7500.00

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 10 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11C.6229

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1909 K Street NW Suite 710
DC9-920-07-01

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 3 / 2 0 0 9

Transaction ID: SA11C.6224

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
BAXTER HEALTHCARE POLITICAL ACTION COMMITTEE

Mailing Address 1501 K Street, NW
Suite 375

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00117838

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 9

Transaction ID: SA11C.6337

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 12500.00

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 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2198

City State Zip Code
LOS BANOS CA 93635

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 03 / 2009

Transaction ID: SA11C.6254

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 JFK Blvd, 49th Floor
35th Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2009

Transaction ID: SA11C.6232

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii Street
C/O CONGRESSIONAL CONSULTANTS

City State Zip Code
El Segundo CA 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2009

Transaction ID: SA11C.6340

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) ▶

10000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 33
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 400 South Tryon Street
ST06F

City State Zip Code
Charlotte NC 28285

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 03 / 2009

Transaction ID: SA11C.6255

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA POLITICAL ACTION COMMITTEE (INDIEPAC)

Mailing Address 412 First Street, SE, Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 25 / 2009

Transaction ID: SA11C.6339

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 03 / 2009

Transaction ID: SA11C.6242

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 / 33
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Mailing Address 601 Pennsylvania Ave., NW
North Building, Suite 1200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11C.6238

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PG&E CORPORATION EMPLOYEES ENERGYPAC

Mailing Address 77 Beale Street Mail Code: B29H

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 9

Transaction ID: SA11C.6227

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW
Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 0 9

Transaction ID: SA11C.6230

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 7500.00

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 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
PRINTING INDUSTRIES OF AMERICA

Mailing Address 601 13th Street NW
Suite 360 North

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 9

Transaction ID: SA11C.6343

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

Mailing Address P. O. Box 718

City Winston-Salem State NC Zip Code 27102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 2 / 2 0 0 9

Transaction ID: SA11C.6226

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
SEMPRA ENERGY EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 101 Ash Street

City San Diego State CA Zip Code 92101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11C.6241

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **10000.00**

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 15 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
TYCO ELECTRONICS CORPORATION POLITICAL ACTION COMMITTEE TELPAC

Mailing Address 607 14th Street NW
Ste. 250

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00433482

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11C.6236

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City State Zip Code
HOUSTON TX 77060

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: SA11C.6346

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
WESTERN UNITED DAIRYMEN'S ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1315 K STREET

City State Zip Code
MODESTO CA 95354

FEC ID number of contributing federal political committee. **C** C00186072

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 9

Transaction ID: SA11C.6253

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

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 16 / 33
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11C.6240

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	70000.00

**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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ADVANTA BANK CORP

Mailing Address P.O. BOX 30715

City SALT LAKE CITY State UT Zip Code 84130

Purpose of Disbursement PAC FUNDRAISING EXPENSE
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB21B.6263
Date of Disbursement
01 / 24 / 2009

Amount of Each Disbursement this Period
387.23

003
Category/
Type

B. Full Name (Last, First, Middle Initial)
LA PIAZZA

Mailing Address 1600 E TULARE AVE

City TULARE State CA Zip Code 93274

Purpose of Disbursement PAC FUNDRAISING EXPENSE
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB21B.6263.0
Date of Disbursement
01 / 24 / 2009

Amount of Each Disbursement this Period
387.23

003
Category/
Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB21B.6269
Date of Disbursement
03 / 09 / 2009

Amount of Each Disbursement this Period
2005.94

002
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ► 2393.17

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)

PAGE 18 / 33

<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)
NEW PAC

A. BANK OF AMERICA - CREDIT CARD

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 15715

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.6272
Date of Disbursement

04 / 10 / 2009

Amount of Each Disbursement this Period

2641.90

B. CARDMEMEBER SERVICES - UNITED

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXPENSE

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.6260
Date of Disbursement

01 / 03 / 2009

Amount of Each Disbursement this Period

284.67

C. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXPENSE

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.6260.0
Date of Disbursement

01 / 03 / 2009

Amount of Each Disbursement this Period

214.17

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2926.57

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)

PAGE 19 / 33

<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CARDMEMEBER SERVICES - UNITED <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement TRAVEL Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6266 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1879.49
B.	Full Name (Last, First, Middle Initial) CARDMEMEBER SERVICES - UNITED <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement TRAVEL Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6267 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1320.69
C.	Full Name (Last, First, Middle Initial) CARDMEMEBER SERVICES - UNITED <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement TRAVEL Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6271 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1997.97

SUBTOTAL of Disbursements This Page (optional) ▶

5198.15

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A. CARDMEMEBER SERVICES - UNITED

Full Name (Last, First, Middle Initial)

CARDMEMEBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6273
Date of Disbursement

04 / 15 / 2009

Amount of Each Disbursement this Period

583.31

B. CARDMEMEBER SERVICES - UNITED

Full Name (Last, First, Middle Initial)

CARDMEMEBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXPENSE

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6274
Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

1773.44

C. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EXPENSE

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6274.0
Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

1773.44

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2356.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CENTRAL VALLEY BUSINESS FORMS	Transaction ID: SB21B.6306
	Mailing Address 7500 W SUNNYVIEW AVE	Date of Disbursement 04 / 27 / 2009
	City VISALIA State CA Zip Code 93291	Amount of Each Disbursement this Period 2388.47
	Purpose of Disbursement PAC FUNDRAISING EXP: HATS/VISORS/JACKETS	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CENTRAL VALLEY BUSINESS FORMS	Transaction ID: SB21B.6373
	Mailing Address 7500 W SUNNYVIEW AVE	Date of Disbursement 06 / 08 / 2009
	City VISALIA State CA Zip Code 93291	Amount of Each Disbursement this Period 1885.10
	Purpose of Disbursement ITEMS FOR DISTRIBUTION AT PAC FUNDRAISER	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CITI CARDS	Transaction ID: SB21B.6270
	Mailing Address P.O. BOX 6406	Date of Disbursement 03 / 24 / 2009
	City THE LAKES State NV Zip Code 88901	Amount of Each Disbursement this Period 1076.60
	Purpose of Disbursement TRAVEL	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ► 5350.17

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) JIM FEBCEO	Transaction ID: SB21B.6282
	Mailing Address 1 CHARLES ST SOUTH, #1012	Date of Disbursement MM / DD / YYYY 02 / 24 / 2009
	City BOSTON State MA Zip Code 02116	Amount of Each Disbursement this Period 1040.34
	Purpose of Disbursement PAC FUNDRAISING EXPENSES	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON	Transaction ID: SB21B.6290
	Mailing Address P.O. Box 7474	Date of Disbursement MM / DD / YYYY 02 / 01 / 2009
	City VISALIA State CA Zip Code 93291	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement OFFICE EXP: CONSULTING	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON	Transaction ID: SB21B.6301
	Mailing Address P.O. Box 7474	Date of Disbursement MM / DD / YYYY 03 / 03 / 2009
	City VISALIA State CA Zip Code 93291	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement OFFICE EXP: CONSULTING	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1440.34

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.6302
Date of Disbursement

Mailing Address P.O. Box 7474

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	9

City VISALIA State CA Zip Code 93291

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE EXP: CONSULTING

001
Category/ Type

200.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.6311
Date of Disbursement

Mailing Address P.O. Box 7474

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	0	9

City VISALIA State CA Zip Code 93291

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE EXP: CONSULTING

001
Category/ Type

200.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.6312
Date of Disbursement

Mailing Address P.O. Box 7474

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City VISALIA State CA Zip Code 93291

Amount of Each Disbursement this Period

Purpose of Disbursement
TRAVEL

002
Category/ Type

13202.93

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

13602.93

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 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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.6316
Date of Disbursement

Mailing Address P.O. Box 7474

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City VISALIA State CA Zip Code 93291

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
OFFICE EXP: CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.6317
Date of Disbursement

Mailing Address P.O. Box 7474

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City VISALIA State CA Zip Code 93291

Amount of Each Disbursement this Period

5492.80

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/SUPPLIES

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
TAYLOR RENTAL

Transaction ID: SB21B.6317.3
Date of Disbursement

Mailing Address 2790 BROAD STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	9

City SAN LUIS OBISPO State CA Zip Code 93401

Amount of Each Disbursement this Period

676.10

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING RENTALS

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

5692.80

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)

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<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)
NEW PAC

<p>A. Full Name (Last, First, Middle Initial) CAHOOTS CATERING CO</p> <p>Mailing Address P.O. BOX 760</p> <p>City PASO ROBLES State CA Zip Code 93445</p> <p>Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/FOOD</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.6317.6</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 969.95</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DAIRY CREEK GOLF COURSE</p> <p>Mailing Address 2990 DAIRY CREEK RD</p> <p>City SAN LUIS OBISPO State CA Zip Code 93405</p> <p>Purpose of Disbursement PAC FUNDRAISING EXP: EVENT FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.6317.8</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 378.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) TOLOSA WINERY</p> <p>Mailing Address 4910 EDNA ROAD</p> <p>City SAN LUIS OBISPO State CA Zip Code 93401</p> <p>Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/FOOD & BEV</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.6317.9</p> <p>Date of Disbursement 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2001.75</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) NATURALLY NUTS	Transaction ID: SB21B.6317.11 Date of Disbursement 06 / 05 / 2009
	Mailing Address 1240 E CALWELL AVE	Amount of Each Disbursement this Period 374.00
	City VISALIA State CA Zip Code 93292	
	Purpose of Disbursement PAC FUNDRAISING EXP: EVENT FOOD/GIFTS	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON	Transaction ID: SB21B.6374 Date of Disbursement 06 / 30 / 2009
	Mailing Address P.O. Box 7474	Amount of Each Disbursement this Period 200.00
	City VISALIA State CA Zip Code 93291	
	Purpose of Disbursement OFFICE EXP: CONSULTING	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KAPIOLANI J SULLENGER	Transaction ID: SB21B.6309 Date of Disbursement 05 / 30 / 2009
	Mailing Address 2958 TEMPLETON RD	Amount of Each Disbursement this Period 400.00
	City TEMPLETON State CA Zip Code 93465	
	Purpose of Disbursement PAC FUNDRAISING EXP: CATERING & STAFFING	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	39560.88

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) BRIAN BILBRAY FOR CONGRESS	Transaction ID: SB23.6354 Date of Disbursement 06 / 24 / 2009	
	Mailing Address 2466 Unicornio Street		
	City Carlsbad State CA Zip Code 92009	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name BRIAN P BILBRAY		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) CHRIS LEE FOR CONGRESS	Transaction ID: SB23.6351 Date of Disbursement 06 / 24 / 2009	
	Mailing Address PO Box 15395		
	City Rochester State NY Zip Code 14615	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name CHRISTOPHER J. LEE		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) DJOU FOR HAWAII	Transaction ID: SB23.6367 Date of Disbursement 06 / 24 / 2009	
	Mailing Address PO BOX 235280		
	City HONOLULU State HI Zip Code 96823	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name CHARLES KONG DJOU		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF DAVE REICHERT Mailing Address P. O. Box 53322 City Bellevue State WA Zip Code 98015 Purpose of Disbursement Candidate Name DAVE REICHERT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6366 Date of Disbursement 06 / 24 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) FRIENDS OF ERIK PAULSEN Mailing Address P.O. Box 44369 250 Prairie Center Drive City Eden Prairie State MN Zip Code 55344 Purpose of Disbursement Candidate Name ERIK PAULSEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6362 Date of Disbursement 06 / 24 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN THUNE Mailing Address 200 NORTH PHILLIPS AVENUE STE L101 City SIOUX FALLS State SD Zip Code 57104 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name JOHN THUNE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6299 Date of Disbursement 02 / 16 / 2009 Amount of Each Disbursement this Period 5000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT	Transaction ID: SB23.6295 Date of Disbursement 04 / 29 / 2009	
	Mailing Address PO Box 50100 PO Box 50100		
	City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period 2000.00	
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type	
	Candidate Name ROY BLUNT		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JOSEPH CAO FOR CONGRESS	Transaction ID: SB23.6276 Date of Disbursement 02 / 12 / 2009	
	Mailing Address PO BOX 56156		
	City NEW ORLEANS State LA Zip Code 70156	Amount of Each Disbursement this Period 2000.00	
	Purpose of Disbursement	011 Category/ Type	
	Candidate Name ANH 'JOSEPH' CAO		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JUDY BIGGERT FOR CONGRESS	Transaction ID: SB23.6348 Date of Disbursement 06 / 24 / 2009	
	Mailing Address P.O. Box 637		
	City Hinsdale State IL Zip Code 60522	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement	011 Category/ Type	
	Candidate Name JUDY BIGGERT		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
KEN CALVERT FOR CONGRESS

Transaction ID: SB23.6356
Date of Disbursement

Mailing Address PO Box 20123

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code
Riverside CA 92516

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

1000.00

Candidate Name
KENNETH S MR. CALVERT

Office Sought: House Senate President
 Disbursement For: 2010
 Primary General
 Other (specify) ▼
 State: CA District: 44

B.

Full Name (Last, First, Middle Initial)
LANCE FOR CONGRESS

Transaction ID: SB23.6363
Date of Disbursement

Mailing Address PO Box 225

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code
Colonia NJ 07067

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2000.00

Candidate Name
LEONARD LANCE

Office Sought: House Senate President
 Disbursement For: 2010
 Primary General
 Other (specify) ▼
 State: NJ District: 07

C.

Full Name (Last, First, Middle Initial)
LEE TERRY FOR CONGRESS

Transaction ID: SB23.6370
Date of Disbursement

Mailing Address PO Box 540098

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code
Omaha NE 68154

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2000.00

Candidate Name
LEE TERRY

Office Sought: House Senate President
 Disbursement For: 2010
 Primary General
 Other (specify) ▼
 State: NE District: 02

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial) LUNGREN FOR CONGRESS <hr/> Mailing Address 9321 Silverbend Lane <hr/> City Elk Grove State CA Zip Code 95624 <hr/> Purpose of Disbursement <hr/> Candidate Name DANIEL E LUNGREN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6355 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03

B. Full Name (Last, First, Middle Initial) LYLE LARSON FOR CONGRESS <hr/> Mailing Address PO BOX 171148 <hr/> City SAN ANTONIO State TX Zip Code 78217 <hr/> Purpose of Disbursement Check returned uncashed. Orig date: 5/14/08 <hr/> Candidate Name LYLE LARSON <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6382 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period -1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23

C. Full Name (Last, First, Middle Initial) MCCOTTER CONGRESSIONAL COMMITTEE <hr/> Mailing Address P.O. Box 530788 <hr/> City LIVONIA State MI Zip Code 48153 <hr/> Purpose of Disbursement <hr/> Candidate Name THADDEUS G MR. MCCOTTER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6359 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS	Transaction ID: SB23.6286 Date of Disbursement
	Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Cincinnati State OH Zip Code 45211	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name STEVE CHABOT	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TEDISCO FOR CONGRESS	Transaction ID: SB23.6279 Date of Disbursement
	Mailing Address 1707 Route 9	<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City Clifton Park State NY Zip Code 12065	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name JAMES TEDISCO	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TERESA HERNANDEZ FOR CONGRESS	Transaction ID: SB23.6303 Date of Disbursement
	Mailing Address P.O. BOX 3114	<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City SOUTH EL MONTE State CA Zip Code 91733	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name TERESA HERNANDEZ	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="29000.00"/>

**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)

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<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) BARRETT FOR GOVERNOR	Transaction ID: SB29.6284 Date of Disbursement
	Mailing Address P.O. BOX 287	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City COLUMBIA State SC Zip Code 29202	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ZACH WAMP FOR GOVERNOR	Transaction ID: SB29.6293 Date of Disbursement
	Mailing Address P.O. BOX 23748	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City CHATTANOOGA State TN Zip Code 37422	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3000.00"/>