

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

ADDRESS (number and street) 175 S. WEST TEMPLE, SUITE 650 SALT LAKE CITY UT 84101

2. FEC IDENTIFICATION NUMBER C00235572 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, Termination Report (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 04 01 2010 through 04 30 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 STANLEY R. DE WAAL

Signature of Treasurer Electronically Filed by STANLEY R. DE WAAL Date 08 16 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.

Office Use Only table with 7 columns and 1 row

FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This report is being amended to include a check that was returned from the bank and redeposited. It was not included on the original report.

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

Write or Type Committee Name  
ORRINPAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

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		63136.16
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	187253.05									
(c) Total Receipts (from Line 19) .....	20907.00	277345.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	208160.05	340481.66								
7. Total Disbursements (from Line 31) .....	26135.44	158457.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	182024.61	182024.61								
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  
ORRINPAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	7500.00	142020.00
(ii) Unitemized .....	6407.00	40075.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13907.00	182095.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	7000.00	95250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	20907.00	277345.50
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)) .....	20907.00	277345.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20907.00	277345.50

**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.....	26135.44	63457.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	26135.44	63457.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	95000.00
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.....	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))..	26135.44	158457.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26135.44	158457.05

**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) .....	20907.00	277345.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20907.00	277345.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26135.44	63457.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26135.44	63457.05

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

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

FOR LINE NUMBER: PAGE 7 / 13  
(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)  
ORRINPAC

**A.**

Full Name (Last, First, Middle Initial)  
AMERICAS HEALTH INSURANCE PLANS  
 Mailing Address 601 PENNSYLVANIA AVE, NW, STE 500  
 City State Zip Code  
 WASHINGTON DC 20004  
 FEC ID number of contributing federal political committee. **C** C00106740  
 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 / 1 3 / 2 0 1 0  
**Transaction ID:** 00416.C3228  
 Amount of Each Receipt this Period  
 5000.00  
 Receipt

**B.**

Full Name (Last, First, Middle Initial)  
ASSOCIATION OF KENTUCKY FRIED CHICKEN  
 Mailing Address FRANCHISEES POLITICAL ACTION COMIT  
 P. O. BOX 26366  
 City State Zip Code  
 ALEXANDRIA VA 22313  
 FEC ID number of contributing federal political committee. **C** C00412098  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 1 3 / 2 0 1 0  
**Transaction ID:** 00416.C3227  
 Amount of Each Receipt this Period  
 2000.00  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7000.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 13

(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)  
ORRINPAC

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD T. CLARK

Mailing Address ONE MERCK DRIVE

City State Zip Code  
WHITEHOUSE STATION NJ 08889

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

Name of Employer Occupation  
MERCK & CO. INC CEO

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 1 0

Transaction ID: 00511.C3382

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
MARY K. CRAWFORD

Mailing Address 303 DOVE CREEK DR

City State Zip Code  
ROUND ROCK TX 78664

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

Name of Employer Occupation  
James Crawford Plumbing Office Assistant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 1 0

Transaction ID: 00813.C3790

Amount of Each Receipt this Period

1000.00

Receipt

NOTE:Redeposit

**C.**

Full Name (Last, First, Middle Initial)  
WILLIAM B. CUNNINGHAM

Mailing Address 32 W. SPRING ST

City State Zip Code  
ALEXANDRIA VA 22301

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

Name of Employer Occupation  
POLARIS CONSULTING PRINCIPAL

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

Transaction ID: 00511.C3383

Amount of Each Receipt this Period

500.00

Receipt

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

6500.00

**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 9 / 13
	(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)  
ORRINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) KIM G. MCREYNOLDS		Date of Receipt
	Mailing Address 178 S. RIO GRANDE ST		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SALT LAKE CITY	UT	84101
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer MANTYLA MCREYNOLDS LLC	Occupation PARTNER	Transaction ID: 00416.C3226
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="1000.00"/>	
Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		Receipt	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="7500.00"/>

**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)  
ORRINPAC

A.	Full Name (Last, First, Middle Initial) Autumn E-Media	Transaction ID: 00513.E2114 Date of Disbursement 04 / 05 / 2010
	Mailing Address PO Box 371553	Amount of Each Disbursement this Period 500.00
	City LAS VEGAS State NV Zip Code 89137-	
	Purpose of Disbursement Pac consulting	Category/ Type PAC CONSULTING
	Candidate Name	
	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) WILLIAM B. CANFIELD	Transaction ID: 00513.E2122 Date of Disbursement 04 / 05 / 2010
	Mailing Address C/O UTRECHT & PHILLIPS, PLLC 1900 M STREET, NW, STE 500	Amount of Each Disbursement this Period 7500.00
	City WASHINGTON State DC Zip Code 20036-	
	Purpose of Disbursement Legal fees	Category/ Type LEGAL FEES
	Candidate Name	
	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) CBIZ MHM, LLC	Transaction ID: 00513.E2115 Date of Disbursement 04 / 05 / 2010
	Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650	Amount of Each Disbursement this Period 2560.00
	City SALT LAKE CITY State UT Zip Code 84101-	
	Purpose of Disbursement Accounting fees	Category/ Type ACCOUNTING FEES
	Candidate Name	
	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) .....	▶	10560.00
<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)

<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)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
E. H. MURRAY GROUP, LLC

Mailing Address 6510 ANNA MARIE COURT

City MC LEAN State VA Zip Code 22101-

Purpose of Disbursement  
Pac consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00513.E2116  
Date of Disbursement  
04 / 05 / 2010

Amount of Each Disbursement this Period  
6794.50

Category/Type  
PAC CONSULTING

**B.** Full Name (Last, First, Middle Initial)  
FLAT CREEK MANAGEMENT

Mailing Address 211 SEVENTH AVENUE NORTH SUITE LL-15

City NASHVILLE State TN Zip Code 37219-

Purpose of Disbursement  
Online merchant fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00513.E2112  
Date of Disbursement  
04 / 19 / 2010

Amount of Each Disbursement this Period  
564.59

Category/Type  
ONLINE MERCHANT FEE

**C.** Full Name (Last, First, Middle Initial)  
FLAT CREEK MANAGEMENT

Mailing Address 211 SEVENTH AVENUE NORTH SUITE LL-15

City NASHVILLE State TN Zip Code 37219-

Purpose of Disbursement  
Online merchant fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00513.E2113  
Date of Disbursement  
04 / 30 / 2010

Amount of Each Disbursement this Period  
1.91

Category/Type  
ONLINE MERCHANT FEE

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 7361.00

**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)  
ORRINPAC

A.

Full Name (Last, First, Middle Initial)  
NORTHCIRCLE, LLC

Mailing Address 552 WEST 925 NORTH CIRCLE

City State Zip Code  
CENTERVILLE UT 84014-

Purpose of Disbursement  
Pac consulting and expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00513.E2117  
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

411.95

PAC CONSULTING AND EXPENSES

B.

Full Name (Last, First, Middle Initial)  
OCTOBER, INC.

Mailing Address 11445 DIVELY AVENUE

City State Zip Code  
LAS VEGAS NV 89138-

Purpose of Disbursement  
Email & website management

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00513.E2118  
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

612.12

EMAIL & WEBSITE MANAGEMENT

C.

Full Name (Last, First, Middle Initial)  
RootsHQ, LLC

Mailing Address 211 7th Avenue North  
Suite LL-15

City State Zip Code  
NASHVILLE TN 37219-

Purpose of Disbursement  
Pac consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00513.E2119  
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

99.00

PAC CONSULTING

SUBTOTAL of Disbursements This Page (optional) ▶

1123.07

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 13 / 13

<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)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
SPECIALTY APPAREL & PROMOTION

Mailing Address 890 WEST ROBINSON DRIVE, STE G

City NORTH SALT LAKE State UT Zip Code 84054-

Purpose of Disbursement Shirts for golf tourney

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00513.E2120  
Date of Disbursement 04 / 07 / 2010

Amount of Each Disbursement this Period 6709.40

Category/Type SHIRTS FOR GOLF TOURNEY

**B.** Full Name (Last, First, Middle Initial)  
ZIONS BANK

Mailing Address 310 SOUTH MAIN ST

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement Service charge

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 00513.E2123  
Date of Disbursement 04 / 30 / 2010

Amount of Each Disbursement this Period 281.97

Category/Type SERVICE CHARGE

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 6991.37

**TOTAL** This Period (last page this line number only) ..... ► 26035.44