

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP	EMPLOYER OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	SCHEDULE CODE
				First Data		P.O. Box 5180	Simi Valley	CA	93062	N/A	EFT	7/29/2011	\$38.00	RE		31A2

\$38.00