



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WEST GULF MARITIME ASSOCIATION PAC

Report Covering the Period: From:

04 01 2016

To:

06 30 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2016</u>		9,112.26
(b) Cash on Hand at Beginning of Reporting Period.....	8,792.26	
(c) Total Receipts (from Line 19).....	- 0 -	36,800.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	8,792.26	12,792.26
7. Total Disbursements (from Line 31).....	40,000.00	8,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4,792.26	4,792.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100





**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

NON-CONFIDENTIAL

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**WEST GULF MARITIME ASSOCIATION PAC**

A. Full Name (Last, First, Middle Initial) <b>WEBER, RANDY</b>		Date of Disbursement <b>05 / 02 / 2016</b>
Mailing Address <b>133 N. FRIENDSWOOD DR. #353</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>FRIENDSWOOD</b>	State <b>TX</b>	
Zip Code <b>77546</b>		Category/ Type
Purpose of Disbursement <b>CONTRIBUTION</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) <b>GRAVES, GARRET</b>		Date of Disbursement <b>05 / 23 / 2016</b>
Mailing Address <b>P.O. BOX 64845</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>BATON ROUGE</b>	State <b>LA</b>	
Zip Code <b>70896</b>		Category/ Type
Purpose of Disbursement <b>CONTRIBUTION</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) <b>POE, TED</b>		Date of Disbursement <b>06 / 20 / 2016</b>
Mailing Address <b>P.O. BOX 14222</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>HUMBLE</b>	State <b>TX</b>	
Zip Code <b>77347</b>		Category/ Type
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<b>3,000.00</b>
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)						PAGE	OF
	<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)  
**WEST GULF MARITIME ASSOCIATION PAC**

A. Full Name (Last, First, Middle Initial) <b>MARTIN, DAVE</b>		Date of Disbursement <b>05/03/2016</b>
Mailing Address <b>1 E. GREENWAY PLAZA, SUITE 1225</b>		
City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77046</b>
Purpose of Disbursement <b>CONTRIBUTION</b>		Amount of Each Disbursement this Period <b>500.00</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. Full Name (Last, First, Middle Initial) <b>SULLIVAN, MIKE</b>		Date of Disbursement <b>05/23/2016</b>
Mailing Address <b>1 E. GREENWAY PLAZA, SUITE 225</b>		
City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77046</b>
Purpose of Disbursement		Amount of Each Disbursement this Period <b>500.00</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>1,000.00</b>
TOTAL This Period (last page this line number only).....▶	

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PREPARER  
(3/2015)



**7/12/16**  
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