

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Super Pac Parties

ADDRESS (number and street) PO Box 731972

Check if different than previously reported. (ACC) Puyallup WA 98373

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00559831

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
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 (12S)

Election on in the State of

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 01 / 01 / 2015 through 03 / 31 / 2015

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 Ronald C. Garner

Signature of Treasurer Ronald C. Garner

Date 04 / 15 / 2015

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 10 columns for Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

2015

 To:

M	M
03	

 /

D	D
31	

 /

2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">2015</td></tr></table>	2015		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">986.11</td></tr></table>	986.11
2015				
986.11				
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">986.11</td></tr></table>	986.11		
986.11				
(c) Total Receipts (from Line 19).....		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3,000.00</td></tr></table>	3,000.00	
3,000.00				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3,000.00</td></tr></table>	3,000.00	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3,000.00</td></tr></table>	3,000.00
3,000.00				
3,000.00				
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">557.64</td></tr></table>	557.64	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">557.64</td></tr></table>	557.64
557.64				
557.64				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">398.48</td></tr></table>	398.48	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">398.48</td></tr></table>	398.48
398.48				
398.48				
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">0.00</td></tr></table>	0.00		
0.00				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3,000.00</td></tr></table>	3,000.00		
3,000.00				

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

01 / 01 / 2015

To:

03 / 31 / 2015

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).....

0.00

0.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.00

0.00

12. Transfers From Affiliated/Other Party Committees.....

0.00

0.00

13. All Loans Received.....

0.00

3,000.00

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 Transfers (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)).....▶

0.00

3,000.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.00

3,000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	557.64	557.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	557.64	557.64
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	557.64	557.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0.00	0.00

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	557.64	557.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	557.64	557.64

NON-FEDERAL

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

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

NAME OF COMMITTEE (In Full)

Super Pac Parties

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2015

A. PAY PAL

Mailing Address

PO Box 2136 Austin, TX 78768

City State Zip Code

Online money transfer service

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.00

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y
02 / 02 / 2015

B. PAY PAL

Mailing Address

PO Box 2136 Austin, TX 78768

City State Zip Code

Online money transfer service

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.00

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2015

C. PAY PAL

Mailing Address

PO Box 2136 Austin, TX 78768

City State Zip Code

Online money transfer service

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.00

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

90.00

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

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

NAME OF COMMITTEE (In Full)
Super Pac Parties

Full Name (Last, First, Middle Initial) A. GO Daddy.com		Date of Disbursement MM / DD / YYYY 01 / 02 / 2015
Mailing Address 14455 N Hayden Rd Ste 226 Scottsdale, AZ 85260		Amount of Each Disbursement this Period 467.64
City State Zip Code Online website hosting and services Purpose of Disbursement		
Candidate Name		Category/ Type
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:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code Purpose of Disbursement		
Candidate Name		Category/ Type
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code Purpose of Disbursement		
Candidate Name		Category/ Type
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).....▶	467.64
TOTAL This Period (last page this line number only).....▶	

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Super Pac Parties

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Garner, Ronald	Nature of Debt (Purpose): Initial Start up of PAC.
Mailing Address PO Box 731972	
City State Zip Code Puyallup, WA 98373	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1,000.00</div>	Amount Incurred This Period <div style="border: 1px solid black; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; height: 20px;"></div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1,000.00</div>
---	---	---	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Garner, Ronald	Nature of Debt (Purpose):
Mailing Address PO Box 731972	
City State Zip Code Puyallup, WA 98373	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">2,000.00</div>	Amount Incurred This Period <div style="border: 1px solid black; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; height: 20px;"></div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">2,000.00</div>
---	---	---	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; height: 20px;"></div>	Amount Incurred This Period <div style="border: 1px solid black; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; height: 20px;"></div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; height: 20px;"></div>
---	---	---	---

1) SUBTOTALS This Period This Page (optional)..... ▶	<div style="border: 1px solid black; height: 20px;"></div>
2) TOTALS This Period (last page this line number only)..... ▶	<div style="border: 1px solid black; height: 20px;"></div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<div style="border: 1px solid black; height: 20px;"></div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; height: 20px;"></div>

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Washington DC 20543

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Date Accepted (MM/DD/YYYY) 4-11-15	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON <input checked="" type="checkbox"/> 10:30 AM Delivery Fee	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Time Accepted 9:15	Weight 19.99 lbs.	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Permit No. 624	Postage \$ 19.99	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Insurance Fee \$	Return Receipt Fee \$	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature
Live Animal Transportation Fee \$	Total Postage & Fees \$ 19.99	Delivery Attempt (MM/DD/YYYY) Time AM PM	Employee Signature

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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JB PREPARER (3/2015)	4/13/15 DATE PREPARED

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