

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name

Lone Star Committee

(b) Address (number and street) check if different than previously reported

1400 Key Blvd., Suite 100

(c) City, State and ZIP Code

Arlington, VA 22209

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement



Amended

4. Covering Period

02 / 20 / 2016

through

02 / 22 / 2016

5. (a) Date of Public Distribution(s)

02 / 20 / 2016

(b) Communication Title

"Reagan Had the Idea"

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes

No

8. Custodian of Records

(a) Name

Rich Danker

(b) Address (number and street)

1400 Key Blvd., Suite 100

(c) City, State and ZIP Code

Arlington, VA 22209

(d) Name of Employer or Principal Place of Business

Lone Star Committee

(e) Occupation

Executive Director

9. Total Donations This Statement

157,000.00

10. Total Disbursements/Obligations This Statement

20,000.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Rich Danker

SIGNATURE

Rich Danker

DATE

03/21/16

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this statement to the penalties of 52 U.S.C. §30109

NOTICE: ON 12/20/2016 00:00:00

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Steven Rosenthal</p> <p>Mailing Address of Donor 3125 Cathedral Ave NW</p> <p>City State Zip Washington DC 20008-3420</p>	<p>Date of Receipt MM / DD / YYYY 12 / 11 / 2015</p> <p>Amount 3,000.00</p>
<p>B. Full Name of Donor Parts Designs Inc.</p> <p>Mailing Address of Donor 17643 County Rd 10</p> <p>City State Zip Bristol IN 46507</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2016</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor Lionshead Specialty Tire & Wheel, LLC</p> <p>Mailing Address of Donor 827 E. Lincoln Ave.</p> <p>City State Zip Goshen IN 42568</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2016</p> <p>Amount 11,000.00</p>
<p>D. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt MM / DD / YYYY</p> <p>Amount</p>
<p>E. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt MM / DD / YYYY</p> <p>Amount</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>16,500.00</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to Line 9)</p>	<p>157,000.00</p>

20160216 10:00:00 AM

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee
Elliott Curson Advertising

Date of Disbursement or Obligation
02 / 18 / 2016

Mailing Address of Payee
1900 Rittenhouse Square

Amount
20,000.00

City Philadelphia, **State** PA, **Zip Code** 19103

Communication Date
02 / 20 / 2016

Name of Employer _____ **Occupation** _____

Purpose of Disbursement (Including title(s) of communication(s))
Radio commercial: "Reagan Had the Idea."

Name of Federal Candidate Ted Cruz	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: NV District: _____	Disbursement/Obligation For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

B. Full Name (Last, First, Middle Initial) of Payee

Mailing Address of Payee

City _____ **State** _____ **Zip Code** _____

Name of Employer _____ **Occupation** _____

Date of Disbursement or Obligation
____ / ____ / _____

Amount

Communication Date
____ / ____ / _____

Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶ 20,000.00

TOTAL This Period (last page this line number only) ▶ 20,000.00
(carry total from last page to Line 10)

1101010000 1 0000000000 0000000000

NONIUM | NUN | LWO | 0110N

Via E-Mail

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): *E-Mail* Date of Receipt or Postmarked
3/21/16

[Signature] *3/22/16*
 PREPARER DATE PREPARED

20160322 10:00:00 AM