

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. Box 70980 Washington DC 20024 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00370130 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 (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 06 / 30 / 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 Diane Evans

Signature of Treasurer Diane Evans [Electronically Filed] Date 07 / 20 / 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.

Office Use Only FE6AN026 FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | <input type="text" value="89856.86"/> | <input type="text" value="89856.86"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="89856.86"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="14023.00"/> | <input type="text" value="14023.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="103879.86"/> | <input type="text" value="103879.86"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="-2910.89"/> | <input type="text" value="-2910.89"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="106790.75"/> | <input type="text" value="106790.75"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 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)..... | 9550.00 | 9550.00 |
| (ii) Unitemized | 4473.00 | 4473.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 14023.00 | 14023.00 |
| (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) | 14023.00 | 14023.00 |
| 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 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))..... ▶ | 14023.00 | 14023.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 14023.00 | 14023.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| 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 | 3089.11 | 3089.11 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 3089.11 | 3089.11 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | -6000.00 | -6000.00 |
| 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)) .. | -2910.89 | -2910.89 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | -2910.89 | -2910.89 |

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) | 14023.00 | 14023.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 14023.00 | 14023.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 3089.11 | 3089.11 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 3089.11 | 3089.11 |

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

| | | | |
|---|------------------------------|-----------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 14 |
| <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 |

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

A. Stuart Armstrong II
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 Gould St.
 Ste. 212
 City State Zip Code
 Needham Heights MA 02494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Centinel Financial Group, LLC Financial Planner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.5319
 Amount of Each Receipt this Period
 250.00

B. Gregg E. Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Larkspur Landing Cit
 City State Zip Code
 Larkspur CA 94939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Meritas Wealth Management Financial Advisor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.5258
 Amount of Each Receipt this Period
 350.00

c. Carol S. Craigie
 Full Name (Last, First, Middle Initial)
 Mailing Address 8781 E Sunridge Hollow Rd
 City State Zip Code
 Parker CO 80134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Fiscal Fitness Clubs America President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA11AI.5271
 Amount of Each Receipt this Period
 800.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1400.00 |
| 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: (check only one) | PAGE 7 OF 14 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

A. John J Crosby
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Doris Ln
 City Middletown State NJ Zip Code 07748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Individual Financial Services Occupation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.5320
 Amount of Each Receipt this Period
250.00

B. Edward W. Gjertsen II
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Waukegan Rd. Ste. 300
 City Northfield State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mack Investment Securities Occupation Financial Planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11AI.5188
 Amount of Each Receipt this Period
300.00

C. Kacy Gott
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 83
 City San Francisco State CA Zip Code 94104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aspiriant Occupation Wealth Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.5259
 Amount of Each Receipt this Period
500.00

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1050.00 |
| 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 8 OF 14
(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 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Troy E. Jones

Mailing Address 3621 NW 63rd St
Ste A1

City Oklahoma City State OK Zip Code 73116

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

Name of Employer Access Financial Resources Occupation Certified Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 07 / 2015
Transaction ID : SA11AI.5256

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Scott M Kahan

Mailing Address 26 South Greeley Ave

City Chappaqua State NY Zip Code 10514

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

Name of Employer Financial Asset Management Occupation President and Senior Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 09 / 2015
Transaction ID : SA11AI.5301

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Keith A. Loveland

Mailing Address 7900 Xerxes Ave
Ste 500

City Minneapolis State MN Zip Code 55431

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

Name of Employer Loveland Consulting Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 13 / 2015
Transaction ID : SA11AI.5179

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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: (check only one) | PAGE 9 OF 14 |
| <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 |

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. David M. Panko | | Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11AI.5181 |
| Mailing Address 452 Westgate Dr | | Amount of Each Receipt this Period 1000.00 |
| City State College | State PA | Zip Code 16803-1334 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Panko Wealth Management | Occupation Financial Advisor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Frank Pare | | Date of Receipt MM / DD / YYYY 02 / 17 / 2015 Transaction ID : SA11AI.5186 |
| Mailing Address 1970 Broadway Ste 525 | | Amount of Each Receipt this Period 100.00 |
| City Oakland | State CA | Zip Code 94612 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer PF Wealth Management Group | Occupation President/Certified Financial Planner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Shannon J. Pike | | Date of Receipt MM / DD / YYYY 03 / 16 / 2015 Transaction ID : SA11AI.5206 |
| Mailing Address 2929 Allen Pkwy Ste. 2850 | | Amount of Each Receipt this Period 500.00 |
| City Houston | State TX | Zip Code 77019 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Asset Management Advisors | Occupation Senior Financial Advisor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1600.00 |
| 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: (check only one) | PAGE 10 OF 14 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

A. Pamela Sandy
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 770739
 City Cleveland State OH Zip Code 44107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Confiance, LLC Occupation Certified Financial Planner
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11AI.5184
 Amount of Each Receipt this Period
 1000.00
 Aggregate Year-to-Date ▼
 1000.00

B. Janet Stanzak
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 American Blvd. W
 City Bloomington State MN Zip Code 55420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Financial Empowerment LLC Occupation Certified Financial Planner
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11AI.5182
 Amount of Each Receipt this Period
 1000.00
 Aggregate Year-to-Date ▼
 1000.00

C. Dave Yeske
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Montgomery St Ste 900
 City San Francisco State CA Zip Code 94104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yeske Buie Occupation Financial Planner
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.5303
 Amount of Each Receipt this Period
 1000.00
 Aggregate Year-to-Date ▼
 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3000.00 |
| 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 11 OF 14
(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)
FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Evelyn M. Zohlen

Mailing Address 5011 Argosy Ave.
Ste 7

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Inspired Financial Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2015

Transaction ID : SA11AI.5183

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| TOTAL This Period (last page this line number only).....▶ | 9550.00 |

**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 |

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)

FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2015

Transaction ID : SB21B.5172

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : SB21B.5173

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.5191

Amount of Each Disbursement this Period

501.11

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

TOTAL This Period (last page this line number only)..... ▶

1501.11

**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 |

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)

FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2015

Transaction ID : SB21B.5192

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : SB21B.5289

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : SB21B.5335

Amount of Each Disbursement this Period

500.00

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

TOTAL This Period (last page this line number only)..... ▶

1500.00

3001.11

**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 checked="" 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)

FINANCIAL PLANNING ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
Voided check from 6/24/14

Candidate Name
ELIZABETH WARREN

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MA District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 10 | / | 2015 |

Transaction ID : SB23.5157

Amount of Each Disbursement this Period

| |
|----------|
| -2500.00 |
|----------|

Full Name (Last, First, Middle Initial)

B. FRIENDS FOR GREGORY MEEKS

Mailing Address 153-01 JAMAICA AVE. SUITE 535

City JAMAICA State NY Zip Code 11432

Purpose of Disbursement
Voided check from 6/24/14

Candidate Name
GREGORY W. MEEKS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 10 | / | 2015 |

Transaction ID : SB23.5156

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. MARKEY COMMITTEE; THE

Mailing Address PO BOX 526

City MEDFORD State MA Zip Code 02155

Purpose of Disbursement
Voided check from 6/24/14

Candidate Name
EDWARD JOHN MARKEY

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MA District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | / | 10 | / | 2015 |

Transaction ID : SB23.5155

Amount of Each Disbursement this Period

| |
|----------|
| -2500.00 |
|----------|

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

TOTAL This Period (last page this line number only)..... ▶

| |
|----------|
| -6000.00 |
|----------|

| |
|----------|
| -6000.00 |
|----------|