

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CNL Financial Group Inc 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="58858.77"/>	<input type="text" value="58858.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80091.11"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1135.20"/>	<input type="text" value="22367.54"/>
(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="81226.31"/>	<input type="text" value="81226.31"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15000.00"/>	<input type="text" value="15000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="66226.31"/>	<input type="text" value="66226.31"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CNL Financial Group Inc Political Action Committee

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

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).....	1135.20	19364.72
(ii) Unitemized	0.00	3002.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1135.20	22367.54
(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)	1135.20	22367.54
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))..... ▶	1135.20	22367.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1135.20	22367.54

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	15000.00
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)) ..	15000.00	15000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	15000.00

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)	1135.20	22367.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1135.20	22367.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CNL Financial Group Inc Political Action Committee

A. Erin Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 2318 Mohawk Trail
 City Maitland State FL Zip Code 32751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation SVP Legal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.52

Date of Receipt 11 / 04 / 2015
Transaction ID : SA11AI.6323
 Amount of Each Receipt this Period 52.63

B. Erin Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 2318 Mohawk Trail
 City Maitland State FL Zip Code 32751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation SVP Legal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.15

Date of Receipt 11 / 09 / 2015
Transaction ID : SA11AI.6333
 Amount of Each Receipt this Period 52.63

C. Erin Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 2318 Mohawk Trail
 City Maitland State FL Zip Code 32751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation SVP Legal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.78

Date of Receipt 11 / 20 / 2015
Transaction ID : SA11AI.6343
 Amount of Each Receipt this Period 52.63

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.89
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 7 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Holly Greer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4062 Shorecrest Drive
 City Orlando State FL Zip Code 32804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015
Transaction ID : SA11AI.6324
 Amount of Each Receipt this Period
 38.46

B. Holly Greer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4062 Shorecrest Drive
 City Orlando State FL Zip Code 32804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015
Transaction ID : SA11AI.6334
 Amount of Each Receipt this Period
 38.46

C. Holly Greer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4062 Shorecrest Drive
 City Orlando State FL Zip Code 32804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNL Financial Group Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015
Transaction ID : SA11AI.6344
 Amount of Each Receipt this Period
 38.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.38
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 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial)
A. Sherry Magee

Mailing Address 8110 Caraway Drive

City State Zip Code
 Orlando FL 32819

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

Name of Employer Occupation
 CNL Financial Group VP of Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 846.12

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015
Transaction ID : SA11AI.6322

Amount of Each Receipt this Period
 38.46

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

Mailing Address 8110 Caraway Drive

City State Zip Code
 Orlando FL 32819

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

Name of Employer Occupation
 CNL Financial Group VP of Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 884.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015
Transaction ID : SA11AI.6332

Amount of Each Receipt this Period
 38.46

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

Mailing Address 8110 Caraway Drive

City State Zip Code
 Orlando FL 32819

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

Name of Employer Occupation
 CNL Financial Group VP of Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 923.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015
Transaction ID : SA11AI.6342

Amount of Each Receipt this Period
 38.46

SUBTOTAL of Receipts This Page (optional)..... ▶ **115.38**

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 16
<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

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Stephen Mauldin
Full Name (Last, First, Middle Initial)
Mailing Address 4119 Wardell Place

City Orlando	State FL	Zip Code 32814
-----------------	-------------	-------------------

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

Name of Employer CNL Financial Group	Occupation Group President - Fund Management
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **846.12**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

Transaction ID : SA11AI.6318

Amount of Each Receipt this Period

38.46

B. Stephen Mauldin
Full Name (Last, First, Middle Initial)
Mailing Address 4119 Wardell Place

City Orlando	State FL	Zip Code 32814
-----------------	-------------	-------------------

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

Name of Employer CNL Financial Group	Occupation Group President - Fund Management
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **884.58**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2015

Transaction ID : SA11AI.6328

Amount of Each Receipt this Period

38.46

C. Stephen Mauldin
Full Name (Last, First, Middle Initial)
Mailing Address 4119 Wardell Place

City Orlando	State FL	Zip Code 32814
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group	Occupation Group President - Fund Management
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.04**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2015

Transaction ID : SA11AI.6338

Amount of Each Receipt this Period

38.46

SUBTOTAL of Receipts This Page (optional).....▶	115.38
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 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Lisa A Schultz
Full Name (Last, First, Middle Initial)
Mailing Address 45 Interlaken Road

City Orlando	State FL	Zip Code 32804
-----------------	-------------	-------------------

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

Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **930.82**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

Transaction ID : SA11AI.6319

Amount of Each Receipt this Period

46.16

B. Lisa A Schultz
Full Name (Last, First, Middle Initial)
Mailing Address 45 Interlaken Road

City Orlando	State FL	Zip Code 32804
-----------------	-------------	-------------------

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

Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **976.98**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2015

Transaction ID : SA11AI.6329

Amount of Each Receipt this Period

46.16

C. Lisa A Schultz
Full Name (Last, First, Middle Initial)
Mailing Address 45 Interlaken Road

City Orlando	State FL	Zip Code 32804
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1023.14**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2015

Transaction ID : SA11AI.6339

Amount of Each Receipt this Period

46.16

SUBTOTAL of Receipts This Page (optional).....▶	138.48
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 11 OF 16
<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

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Joel R Schwalbe		Date of Receipt MM / DD / YYYY 11 / 04 / 2015 Transaction ID : SA11AI.6321
Mailing Address 358 Brantley Club Place		Amount of Each Receipt this Period 9.62
City Longwood	State FL	
Zip Code 32779		Amount of Each Receipt this Period 211.52
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group, Inc.	Occupation Chief Information Officer	Amount of Each Receipt this Period 9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.52	

Full Name (Last, First, Middle Initial) B. Joel R Schwalbe		Date of Receipt MM / DD / YYYY 11 / 09 / 2015 Transaction ID : SA11AI.6331
Mailing Address 358 Brantley Club Place		Amount of Each Receipt this Period 9.62
City Longwood	State FL	
Zip Code 32779		Amount of Each Receipt this Period 221.14
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group, Inc.	Occupation Chief Information Officer	Amount of Each Receipt this Period 9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.14	

Full Name (Last, First, Middle Initial) C. Joel R Schwalbe		Date of Receipt MM / DD / YYYY 11 / 20 / 2015 Transaction ID : SA11AI.6341
Mailing Address 358 Brantley Club Place		Amount of Each Receipt this Period 9.62
City Longwood	State FL	
Zip Code 32779		Amount of Each Receipt this Period 230.76
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group, Inc.	Occupation Chief Information Officer	Amount of Each Receipt this Period 9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 12 OF 16
<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

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Steven D. Shackelford
Full Name (Last, First, Middle Initial)

Mailing Address 3600 Delaney Street

City Orlando State FL Zip Code 32806

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

Name of Employer: CNL Financial Group, Inc. Occupation: COO of CNL Real Estate Advisors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **211.53**

Date of Receipt: **11 / 04 / 2015**

Transaction ID : SA11AI.6320

Amount of Each Receipt this Period: **19.23**

B. Steven D. Shackelford
Full Name (Last, First, Middle Initial)

Mailing Address 3600 Delaney Street

City Orlando State FL Zip Code 32806

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

Name of Employer: CNL Financial Group, Inc. Occupation: COO of CNL Real Estate Advisors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt: **11 / 09 / 2015**

Transaction ID : SA11AI.6330

Amount of Each Receipt this Period: **19.23**

C. Steven D. Shackelford
Full Name (Last, First, Middle Initial)

Mailing Address 3600 Delaney Street

City Orlando State FL Zip Code 32806

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

Name of Employer: CNL Financial Group, Inc. Occupation: COO of CNL Real Estate Advisors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **249.99**

Date of Receipt: **11 / 20 / 2015**

Transaction ID : SA11AI.6340

Amount of Each Receipt this Period: **19.23**

SUBTOTAL of Receipts This Page (optional).....▶	57.69
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 13 OF 16
	<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	

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeffrey R Shafer			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2015 Transaction ID : SA11AI.6316
Mailing Address 2241 Lafayette Ave			Amount of Each Receipt this Period 76.92
City Winter Park	State FL	Zip Code 32789	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 846.12	
Name of Employer CNL Financial Group		Occupation President of CNL Capital Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jeffrey R Shafer			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2015 Transaction ID : SA11AI.6326
Mailing Address 2241 Lafayette Ave			Amount of Each Receipt this Period 76.92
City Winter Park	State FL	Zip Code 32789	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 923.04	
Name of Employer CNL Financial Group		Occupation President of CNL Capital Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Jeffrey R Shafer			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2015 Transaction ID : SA11AI.6336
Mailing Address 2241 Lafayette Ave			Amount of Each Receipt this Period 76.92
City Winter Park	State FL	Zip Code 32789	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 999.96	
Name of Employer CNL Financial Group		Occupation President of CNL Capital Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	230.76
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 14 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Tetrick

Mailing Address 1223 Lake Highland Drive

City Orlando State FL Zip Code 32803

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

Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **846.12**

Date of Receipt
11 / 04 / 2015

Transaction ID : SA11AI.6317

Amount of Each Receipt this Period
38.46

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

Mailing Address 1223 Lake Highland Drive

City Orlando State FL Zip Code 32803

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

Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **884.58**

Date of Receipt
11 / 09 / 2015

Transaction ID : SA11AI.6327

Amount of Each Receipt this Period
38.46

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

Mailing Address 1223 Lake Highland Drive

City Orlando State FL Zip Code 32803

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

Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.04**

Date of Receipt
11 / 20 / 2015

Transaction ID : SA11AI.6337

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional)..... ▶ **115.38**

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 15 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial)
A. Melissa Wall

Mailing Address 6140 Golden Dewdrop Trail

City Windermere State FL Zip Code 34786

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

Name of Employer CNL Financial Group Occupation SVP, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2015

Transaction ID : SA11AI.6325

Amount of Each Receipt this Period
20.00

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

Mailing Address 6140 Golden Dewdrop Trail

City Windermere State FL Zip Code 34786

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

Name of Employer CNL Financial Group Occupation SVP, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11AI.6335

Amount of Each Receipt this Period
20.00

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

Mailing Address 6140 Golden Dewdrop Trail

City Windermere State FL Zip Code 34786

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

Name of Employer CNL Financial Group Occupation SVP, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : SA11AI.6345

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	1135.20

**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

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2015

Transaction ID : SB23.6315

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 720

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2015

Transaction ID : SB23.6314

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. US CHAMBER OF COMMERCE

Mailing Address 1615 H STREET NW

City WASHINGTON State DC Zip Code 20062

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2015

Transaction ID : SB23.6313

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

15000.00