

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Ann PAC

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"/>		24167.32
(b) Cash on Hand at Beginning of Reporting Period.....	26266.16	
(c) Total Receipts (from Line 19)	21500.00	41000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	47766.16	65167.32
7. Total Disbursements (from Line 31).....	10848.00	28249.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	36918.16	36918.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Ann PAC

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).....	1000.00	16500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1000.00	16500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20500.00	24500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21500.00	41000.00
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))..... ▶	21500.00	41000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21500.00	41000.00

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	1348.00	13749.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1348.00	13749.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	14500.00
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)) ..	10848.00	28249.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10848.00	28249.16

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)	21500.00	41000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21500.00	41000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1348.00	13749.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1348.00	13749.16

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 13
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<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)
Ann PAC

A. Full Name (Last, First, Middle Initial)
Susan Brackin Hirschmann

Mailing Address 4052 Seminary Rd

City Alexandria	State VA	Zip Code 22304-1646
--------------------	-------------	------------------------

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

Name of Employer Williams & Jensen PLLC	Occupation Partner
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	27	/	2015

Transaction ID : AD38B46F7936B4F37951

Amount of Each Receipt this Period
1000.00

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

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

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

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Ann PAC

Full Name (Last, First, Middle Initial)
A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G St. NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : AD5991A7FEE474053AE2

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1061 American Lane

City Schaumburg State IL Zip Code 60173-4973

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : A0F35712C1957459EB1A

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
C. Anheuser-Busch PAC

Mailing Address One Busch Place 202-7

City Saint Louis State MO Zip Code 63118-1849

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : A1A1E3CD58C8942CDA19

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Ann PAC

A. Raytheon Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 Wilson Boulevard
 Suite 1500
 City Arlington State VA Zip Code 22209-3900
 FEC ID number of contributing federal political committee. **C** C00097568
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : AE0E0DC8A243F456897B
 Amount of Each Receipt this Period
 2500.00

B. Prudential Financial, Inc. State & Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 751 Broad Street
 14th Floor
 City Newark State NJ Zip Code 07102-3714
 FEC ID number of contributing federal political committee. **C** C00493304
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : AB1E55262D05D42D0B7D
 Amount of Each Receipt this Period
 2500.00

C. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 Pennsylvania Avenue, NW
 Suite 200
 City Washington State DC Zip Code 20004-3610
 FEC ID number of contributing federal political committee. **C** C00274431
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : A0364E63805D24D33B50
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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 9 OF 13
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Ann PAC

A. Full Name (Last, First, Middle Initial)
ExelonPAC

Mailing Address **PO Box 805379**

City **Chicago** State **IL** Zip Code **60680-4179**

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : AD1004ECCF81E496CA3E

Amount of Each Receipt this Period
3000.00

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	20500.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial) A. Gula Graham Group		Date of Disbursement MM / DD / YYYY 03 / 13 / 2015
Mailing Address 499 S Capitol St SW Ste 420		Transaction ID : B4D40C18B2ADC47B5820
City Washington	State DC	
Zip Code 20003-4027	Purpose of Disbursement Fundraising Fee	Amount of Each Disbursement this Period 450.00
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. Capital Enhancement, Inc.		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 150 Long Rd Ste 50		Transaction ID : B4F74057D66594086AF1
City Chesterfield	State MO	
Zip Code 63005-1239	Purpose of Disbursement Administrative Consulting	Amount of Each Disbursement this Period 500.00
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. Aristotle International, Inc.		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 205 Pennsylvania Ave SE		Transaction ID : B9EBF9431BFF94C52A42
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Database Services	Amount of Each Disbursement this Period 300.00
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).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	1250.00

**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 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)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Valadao for Congress

Mailing Address 504 VAN NESS

City Fresno State CA Zip Code 93721-2924

Purpose of Disbursement
Political Contribution: Primary 2016

Candidate Name
Rep. David G. Valadao

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District: 21

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : **B61D11B9D210E4C07AE3**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Jenkins for Congress

Mailing Address PO Box 727

City Huntington State WV Zip Code 25711-0727

Purpose of Disbursement
Political Contribution: Primary 2016

Candidate Name
Rep. Evan H. Jenkins

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: WV District: 03

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2015

Transaction ID : **BB2E26C088854C7B975**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dold for Congress

Mailing Address PO BOX 6312

City Libertyville State IL Zip Code 60048-6312

Purpose of Disbursement
Political Contribution: Primary 2016

Candidate Name
Robert James Dold Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 10

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2015

Transaction ID : **B22273E1B22934F19AB3**

Amount of Each Disbursement this Period

1000.00

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

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

4000.00

**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 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)
Ann PAC

Full Name (Last, First, Middle Initial) A. Billy Long for Congress		Date of Disbursement MM / DD / YYYY 03 / 27 / 2015
Mailing Address 3246 E. RIDGEVIEW STREET		Transaction ID : B8A6439FB39E443A2BF8
City Springfield	State MO	
Zip Code 65804-4076	Purpose of Disbursement Political Contribution: Primary 2016	Amount of Each Disbursement this Period 2500.00
Candidate Name Rep. Billy Long	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. McSally for Congress		Date of Disbursement MM / DD / YYYY 03 / 27 / 2015
Mailing Address PO Box 19128		Transaction ID : BA745C830E41D49A7904
City Tucson	State AZ	
Zip Code 85731-9128	Purpose of Disbursement Political Contribution: Primary 2016	Amount of Each Disbursement this Period 1000.00
Candidate Name Martha McSally	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 02		

Full Name (Last, First, Middle Initial) C. Carlos Curbelo Congress		Date of Disbursement MM / DD / YYYY 03 / 27 / 2015
Mailing Address 8770 SUNSET DRIVE #335		Transaction ID : B008760684D234C8D9DA
City Miami	State FL	
Zip Code 33173-3512	Purpose of Disbursement Political Contribution: Primary 2016	Amount of Each Disbursement this Period 1000.00
Candidate Name Carlos Curbelo	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 26		

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

4500.00

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

**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)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Hurd For Congress

Mailing Address PO BOX 761029

City San Antonio State TX Zip Code 78245-6029

Purpose of Disbursement
Political Contribution: Primary 2016

Candidate Name
Rep. Will Hurd

Office Sought: House
 Senate
 President
State: TX District: 23

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : B7719730E6BAB49C6B7C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

9500.00