PAGE 1 / 19

Image# 201608209022649084

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3X Fo | or Other Than An Auth | orized Committee | Offic | e Use Only |
|---|---|--|---|---|
| 1. NAME OF T COMMITTEE (in full) | YPE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 | |
| GOPAC Election Fund | | | | |
| | | | | |
| ADDRESS (number and street) | 2300 CLARENDON BLVD ST | ΓΕ. 1305 | | |
| Check if different than previously reported. (ACC) | ARLINGTON | | VA 22 | 2201 |
| 2. FEC IDENTIFICATION NUI | MBER ▼ CITY | ₹ ▲ | STATE ▲ | ZIP CODE ▲ |
| C C00559740 | 3. IS | THIS EPORT X NEW (N) OR | AMEND (A) | ED |
| 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) | Report Due On: Mar 2 Apr 2 (c) 12-Day PRE-Election Report for the: | General (30G) | Aug 20 (M Sep 20 (M Oct 20 (M General (12G) Special (12S) Runoff (30R) | (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) |
| 5. Covering Period 07 | / DID / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | / D D / Y | 2016 |
| I certify that I have examined this | • | my knowledge and belief it is to | rue, correct and com | nplete. |
| Type or Print Name of Treasurer Signature of Treasurer WILLIA | WILLIAM JOHNSON AM JOHNSON | [Electronically Filed] | Date 08 / | 20 / 2016 |
| NOTE: Submission of false, erroned | ous, or incomplete information | may subject the person signing | this Report to the per | nalties of 2 U.S.C. §437g. |
| Office Use Only | | | F | EC FORM 3X Rev. 12/2004 |

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **GOPAC Election Fund** 07 2016 07 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 10274.58 January 1, 2016 (b) Cash on Hand at 32323.08 Beginning of Reporting Period..... 29952.95 345233.34 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 355507.92 62276.03 6(a) and 6(c) for Column B)..... 41027.01 334258.90 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 21249.02 21249.02 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

| GOF | ΔC | Election | Fund |
|-----|------------|----------|-------|
| COL | | トルウンロンコ | i una |

| ontributions (other than loans) From: | Total This Period | Calendar Year-to-Date |
|---|----------------------|-----------------------|
| , | 101111 11110 1 01101 | |
| a) Individuals/Persons Other | | |
| Than Political Committees | | |
| (i) Itemized (use Schedule A) | 1200.00 | 14510.00 |
| | | |
| (ii) Unitemized | 1252.95 | 11655.74 |
| | | 26165.74 |
| Lines 11(a)(i) and (ii)▶ | 2452.95 | 26165.74 |
| | 0.00 | 0.00 |
| | 0.00 | 0.00 |
| | 2500.00 | 5000.00 |
| | 7 | 7 |
| | | |
| | 4952.95 | 31165.74 |
| | 7 | |
| | 0.00 | 0.00 |
| ary commission | | |
| Il Loans Received | 0.00 | 0.00 |
| | 7 | 7 |
| nan Renayments Received | 0.00 | 0.00 |
| | 7 | 7 |
| | | |
| · · · · · · · · · · · · · · · · · · · | 0.00 | 0.00 |
| | 7 | |
| Federal Candidates and Other | | |
| olitical Committees | 0.00 | 0.00 |
| ther Federal Receipts | | |
| Dividends, Interest, etc.) | 25000.00 | 314067.60 |
| ransfers from Non-Federal and Levin Funds | | |
| a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| | | |
|) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | | |
| c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| | (iii) Unitemized | (ii) Unitemized |

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: — | Total Tillo I Gilou | Gaieriuai Teal-tu-Date |
| (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 | 2027.04 | 0267.75 |
| Expenditures | 2027.01 | 9267.75 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ | 2027.01 | 9267.75 |
| 22. Transfers to Affiliated/Other Party | 2027.01 | 0201.10 |
| Committees | 0.00 | 0.00 |
| 3. Contributions to | | |
| Federal Candidates/Committees and Other Political Committees | 0.00 | 16500.00 |
| 4. Independent Expenditures | | |
| (use Schedule E) | 0.00 | 0.00 |
| 5. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | |
| (use Schedule F) | 0.00 | 0.00 |
| O Loop Borrows to Mark | 0.00 | 0.00 |
| 6. Loan Repayments Made | 0.00 | 0.00 |
| 7. Loans Made | 0.00 | 0.00 |
| 8. Refunds of Contributions To: | 7 7 | |
| (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 |
| (I) T. I O . II II . B (. I | | |
| (d) Total Contribution Refunds | 0.00 | 0.00 |
| (add Lines 28(a), (b), and (c))▶ | 7 7 | 0.00 |
| 9. Other Disbursements | 39000.00 | 308491.15 |
| | | |
| 0. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity | | |
| (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (**) III - : II Ol | 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 | 0.00 | |
| Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| | 7 | 7 |
| 1. Total Disbursements (add Lines 21(c), 22, | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 41027.01 | 334258.90 |
| | | |
| 2. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |
| from Line 31) | 41027.01 | 334258.90 |

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 |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 4952.95 | 31165.74 |
| 4. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4952.95 | 31165.74 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 2027.01 | 9267.75 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 8. Net Operating Expenditures (subtract Line 37 from Line 36) | 2027.01 | 9267.75 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 19 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) GOPAC Election Fund Full Name (Last, First, Middle Initial) MR. E. M. BAKWIN Date of Receipt Mailing Address 433 WEST U.S. HIGHWAY 20 05 2016 07 City Zip Code State Transaction ID: SA11A.831437 IN LA PORTE 46350-8609 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer Occupation CONTRIBUTION RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. MR. DENNIS W. LOHSE Date of Receipt Mailing Address 4311 E. CHESTNUT LN 07 05 2016 City State Zip Code Transaction ID: SA11A.831443 **GILBERT** ΑZ 85298-8002 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation INFORMATION REQUESTED PER BEST CONTRIBUTION INFORMATION REQUESTED PER BEST EFF Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. MR. MIKE ORRADRE Date of Receipt Mailing Address 67100 SARGEANT CANYON ROAD 05 07 2016 City State Zip Code Transaction ID: SA11A.831441 CA SAN ARDO 93450-Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation CONTRIBUTION **RANCHER** SELF-EMPLOYED Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 19 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) GOPAC Election Fund Full Name (Last, First, Middle Initial) MR. B. WHITE-SPUNNER Date of Receipt Mailing Address 362 CHARLESTON COURT 2016 07 19 City Zip Code State Transaction ID: SA11A.831459 **MOBILE** AL 36608-2434 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation CONTRIBUTION WHITES SPUNNER ASSOCIATES REAL ESTATE BROKER Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 1200.00 TOTAL This Period (last page this line number only).....

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| SCHEDULE A (FEC Form 3 | X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 8 OF 19 (check only one) |
|--|---------------------------------------|--|--|
| TEMIZED RECEIPTS | | for each category of the Detailed Summary Page | 11a 11b X 11c 12 13 14 15 16 17 |
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) GOPAC Election Fund | and Statements ma g the name and a | ay not be sold or used by any p ddress of any political committed | erson for the purpose of soliciting contributions e to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) ENTERPRISE HOLDINGS, INC. Mailing Address 600 CORPORATE PAR City ST. LOUIS FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | State MO C Coo | Zip Code 63105 0219642 | Date of Receipt 07 27 2016 Transaction ID: SA11C.19299 Amount of Each Receipt this Period 2500.00 Memo Item |
| Full Name (Last, First, Middle Initial) Mailing Address City | State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer | C | | Amount of Each Receipt this Period Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ |] |
| Full Name (Last, First, Middle Initial) Mailing Address | | | Date of Receipt |
| City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General | C Occupation Aggregate | Zip Code Year-to-Date ▼ | Amount of Each Receipt this Period Memo Item |
| Other (specify) ▼ SUBTOTAL of Receipts This Page (option | | | 2500.00 |
| TOTAL This Period (last page this line nur | mbor only) | | 2500.00 |

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

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| SCHEDULE A (FEC Form | 3X) | se separate schedule(s) | FOR LINE NUMBER: PAGE 9 OF 19 (check only one) | | | | | | | | |
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| Any information copied from such Reports or for commercial purposes, other than us | | | | | | | | | | | |
| NAME OF COMMITTEE (In Full) GOPAC Election Fund | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) 4. GOPAC | | | Da | ite of | Re | ceipt | | | | | |
| Mailing Address 2300 CLARENDON B STE. 1305 | | | | 07 | / | 29 | - 1 | ′ Y | 20 | | |
| City ARLINGTON | | Zip Code 22201 | | | | on ID | | | | riod | |
| FEC ID number of contributing federal political committee. | С | | | iouni | OI | Each I | nece | ipt tr | - | 000.00 |) |
| Name of Employer | Occupation | | co | Men NTRIE | | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year | -to-Date ▼ 313467.60 |] | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Da | ite of | Re | ceipt | | | | | |
| Mailing Address | | | T. | M | / | D II | D | / Y | Y | Υ | |
| City | State | Zip Code | An | nount | of | Each I | Rece | ipt th | nis Pe | eriod | _ |
| FEC ID number of contributing federal political committee. | С | | | _ | | , | _ | 7 | | - | Ξ |
| Name of Employer | Occupation | | | Men | no It | tem | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year | -to-Date ▼ | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Da | ite of | Re | ceipt | | | | | |
| Mailing Address | | | | I = M | / | D | D | / Y | Υ | Υ | 7 |
| City | State | Zip Code | An | nount | of | Each I | Rece | int th | nis Pe | eriod | _ |
| FEC ID number of contributing federal political committee. | С | | | | | , | | , | | | _ |
| Name of Employer | Occupation | | | Men | no It | tem | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year | -to-Date ▼ |] | | | | | | | | |
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TOTAL This Period (last page this line number only).....

25000.00

| NUMBER: PAGE 10 OF 1 one) 22 23 24 25 25 26 28 28 28 28 29 3 |
|--|
| n for the purpose of soliciting contributions solicit contributions from such committee. |
| Date of Disbursement O7 |
| Transaction ID : SB21B.9090 Amount of Each Disbursement this Period |
| 200.00 Memo Item |
| Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Transaction ID : SB21B.9119 Amount of Each Disbursement this Period 1797.29 |
| Memo Item |
| Date of Disbursement |
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| Amount of Each Disbursement this Period |
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| Use separate schedules (speec only one) (spe | for each category of the Detailed Summary Page | e Concort only | 22 23 24 25 26 |
|--|---|--|---|
| 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) GOPAC Election Fund Full Name (Last, First, Middle Initial) A. ADAM PUGH FOR STATE SENATE Mailing Address 4625 SPECTACULAR BID AVENUE City State Zip Code Conditionation (Contribution) Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) B. BART FROMUTH FOR STATE REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD City State Zip Code NH 03110 Condidate Name Office Sought: House Disbursement For: Senate President Other (specify) ▼ Sonate President Disbursement this Perior State REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD City State Zip Code NH 03110 Condidate Name Contribution Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) ▼ Sonate President Disbursement Contribution Candidate Name Category/ 12 2016 Transaction ID: SB29.8083 Amount of Each Disbursement Contribution Category/ 12 2016 Transaction ID: SB29.8083 Amount of Each Disbursement Contribution Candidate Name Other (specify) ▼ Transaction ID: SB29.8083 Amount of Each Disbursement this Perior Contribution Transaction ID: SB29.8083 Amount of Each Disbursement this Perior Contribution Candidate Name Other (specify) ▼ Other (specify) ▼ Transaction ID: SB29.8083 Amount of Each Disbursement this Perior Contribution Other (specify) ▼ Transaction ID: SB29.8083 Amount of Each Disbursement this Perior Contribution Other (specify) ▼ Transaction ID: SB29.8083 | ments may not be sold or | | |
| NAME OF COMMITTEE (In Full) GOPAC Election Fund Full Name (Last, First, Middle Initial) A ADAM PUGH FOR STATE SENATE Mailing Address 4825 SPECTACULAR BID AVENUE City EDMOND Cardidate Name Office Sought: House Disbursement For: Senate Primary General O7 12 2016 City Full Name (Last, First, Middle Initial) B BART FROMUTH FOR STATE REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD City State: Disbursement O7 28 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement O7 28 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement O7 12 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior O7 12 2016 Transaction ID: \$829.8088 Amount of Each Disbursement O7 12 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior Senate Primary General O7 12 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior Senate Primary General O7 12 2016 Transaction ID: \$829.8088 Amount of Each Disbursement this Perior O7 12 2016 Transaction ID: \$829.8081 Transaction ID: \$829.8081 Amount of Each Disbursement this Perior O7 12 2016 Transaction ID: \$829.8081 Transaction ID: \$829.8081 Amount of Each Disbursement O7 12 2016 Transaction ID: \$829.8083 Transaction ID: \$829.8083 Transaction ID: \$829.8083 Transaction ID: \$829.8083 Amount of Each Disbursement this Perior O7 12 2016 Transaction ID: \$829.8083 Transaction ID: \$829.8083 | | | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) A. ADAM PUGH FOR STATE SENATE Mailing Address 4625 SPECTACULAR BID AVENUE City EIDMOND Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State President Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State Disbursement Disbursement For: Senate President Other (specify) ▼ Date of Disbursement Transaction ID : SB29.8081 Amount of Each Disbursement Full Name (Last, First, Middle Initial) Category' Type Date of Disbursement Other (specify) ▼ Transaction ID : SB29.8083 Amount of Each Disbursement Contribution Category' Type Office Sought: Full Name (Last, First, Middle Initial) City DRY RIDGE KY 41035 Full State Disbursement Contribution Candidate Name Office Sought: House Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: Memolitem Non FEDERAL CONTRIBUTION | ne and address of any po | iiticai committee to | solicit contributions from such committee. |
| A. ADAM PUGH FOR STATE SENATE Mailing Address 4625 SPECTACULAR BID AVENUE | | | |
| Mailing Address 4625 SPECTACULAR BID AVENUE City State Zip Code EDMOND OK 73025 Purpose of Disbursement CONTRIBUTION Candidate Name Disbursement Periodent District: Full Name (Last, First, Middle Initial) BART FROMUTH FOR STATE REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD City State Zip Code NH 03110 Purpose of Disbursement CONTRIBUTION Candidate Name Category/ Type Date of Disbursement this Periodent Disbursement For: Candidate Name Category/ Type Date of Disbursement Disbursement CONTRIBUTION Transaction ID: SB29.8083 Amount of Each Disbursement Amount of Each Disbursement this Periodent Disbursement Contribution Transaction ID: SB29.8081 Amount of Each Disbursement this Periodent Disbursement Eor: Senate Primary General Disbursement Contribution District: Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Date of Disbursement this Periodent Disbursement Eor: Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement Contribution Date of Disbursement this Periodent Disbursement For: City State Zip Code KY 41035 Purpose of Disbursement Contribution Candidate Name Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement this Periodent Disbursement For: City State Zip Code KY 41035 Purpose of Disbursement Contribution Candidate Name Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement this Periodent Disbursement For: Contribution Office Sought: Periation Other (specify) ▼ Memoltem Non FEDERAL CONTRIBUTION Disbursement For: Office Sought: Periadent For: Office Sought: P | | | Date of Dishuranes |
| Mailing Address 4625 SPECTACULAR BID AVENUE | ΤE | | |
| EDMOND Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House | JE | | |
| EDWOND Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House President Primary General CONTRIBUTION Candidate Name Office Sought: House President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) State: Disbursement For: Senate Primary General CONTRIBUTION Candidate Name Office Sought: House Primary General CONTRIBUTION Candidate Name Office Sought: House Primary General Office Sought: State Zip Code NH 03110 Candidate Name Category/ Type Date of Disbursement this Perior Amount of Each Disbursement this Perior Category/ Type Date of Disbursement this Perior Date of Disbursement this Perior NON FEDERAL CONTRIBUTION Transaction ID: SB29.8081 Amount of Each Disbursement this Perior Date of Disbursement Date of Disbursement Transaction ID: SB29.8083 Amount of Each Disbursement CONTRIBUTION Candidate Name Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement this Perior Cardidate Name Office Sought: House Disbursement For: Office Sought: House Disburs | | | Transaction ID : SB29.8088 |
| CONTRIBUTION Candidate Name Category/ Type Disbursement For: Senate Prissident State: District: Full Name (Last, First, Middle Initial) Category/ Type Date of Disbursement Contribution Category/ Type Date of Disbursement Contribution Transaction ID : S829.8081 Amount of Each Disbursement this Perior Date of Disbursement Contribution Transaction ID : S829.8081 Amount of Each Disbursement Date of Disbursement Transaction ID : S829.8081 Amount of Each Disbursement Category/ Type Memo Item NON FEDERAL CONTRIBUTION Category/ Type Date of Disbursement this Perior Category/ Type Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement this Perior Transaction ID : S829.8081 Amount of Each Disbursement this Perior Date of Disbursement Contribution Date of Disbursement Transaction ID : S829.8083 Transaction ID : S829.8083 Amount of Each Disbursement City DRY RIDGE Purpose of Disbursement Contribution Category/ Type Date of Disbursement Transaction ID : S829.8083 Amount of Each Disbursement this Perior Category/ Type Transaction ID : S829.8083 Amount of Each Disbursement this Perior Category/ Type Transaction ID : S829.8083 Amount of Each Disbursement this Perior Category/ Type Transaction ID : S829.8083 Amount of Each Disbursement this Perior Category/ Type Transaction ID : S829.8083 Amount of Each Disbursement this Perior Category/ Type Ty | OK 73025 | | |
| Office Sought: | | | Amount of Each Disbursement this Period |
| Office Sought: House | | Category/ | 4000.00 |
| Senate Prisident Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) BART FROMUTH FOR STATE REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD City State Zip Code BEDFORD NH 03110 Purpose of Disbursement CONTRIBUTION Candidate Name Disbursement For: Senate Primary General Primary General Purpose of Disbursement CONTRIBUTION State: District: Full Name (Last, First, Middle Initial) C. BRIAN LINDER FOR STATE REPRESENTATIVE Mailing Address 16 RIDGEVIEW CIRCLE City State Zip Code Senate Purpose of Disbursement CONTRIBUTION Candidate Name City State Zip Code Date of Disbursement this Perion Category/ Type Date of Disbursement this Perion Category/ Type Memo Item NON FEDERAL CONTRIBUTION Transaction ID : SB29.8083 Transaction ID : SB29.8083 Amount of Each Disbursement this Perion Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Memo Item NON FEDERAL CONTRIBUTION Candidate Name Category/ Type Transaction ID : SB29.8083 Amount of Each Disbursement this Perion Category/ Type Office Sought: House Disbursement For: Memo Item NON FEDERAL CONTRIBUTION Candidate Name Category/ Type Office Sought: House Disbursement For: Memo Item NON FEDERAL CONTRIBUTION | | | 1000.00 |
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| B. BART FROMUTH FOR STATE REPRESENTATIVE Mailing Address 71 CAMBRIDGE ROAD | · | | |
| City State Zip Code NH 03110 Purpose of Disbursement CONTRIBUTION Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. BRIAN LINDER FOR STATE REPRESENTATIVE Mailing Address 16 RIDGEVIEW CIRCLE City State Zip Code NY 41035 Purpose of Disbursement CONTRIBUTION Candidate Name Category/ Type Transaction ID: SB29.8081 Amount of Each Disbursement this Perion Memo Item NON FEDERAL CONTRIBUTION Transaction ID: SB29.8083 Amount of Each Disbursement Contribution Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement this Perion Category/ Type Transaction ID: SB29.8083 Amount of Each Disbursement this Perion Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item NON FEDERAL CONTRIBUTION | EPRESENTATIVE | | M = M / D = D / Y = Y = Y |
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| Contribution Candidate Name Category/ Type Office Sought: House Senate President Disbursement For: Primary General Other (specify) NON FEDERAL CONTRIBUTION | • | | Transaction ID : SB29.8083 |
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| Office Sought: House | | | 1000.00 |
| State: District: | Primary General | | Memo Item |
| | | | |
| | | State Zip Code OK 73025 ment For: Primary Genera Other (specify) ▼ EPRESENTATIVE State Zip Code NH 03110 ment For: Primary Genera Other (specify) ▼ PRESENTATIVE State Zip Code NH 03110 MEDITION OF THE PRIMARY General Other (specify) ▼ PRESENTATIVE State Zip Code KY 41035 | State Zip Code OK 73025 Category/ Type ment For: Primary General Other (specify) EPRESENTATIVE State Zip Code NH 03110 Category/ Type ment For: Primary General Other (specify) PRESENTATIVE Category/ Type PRESENTATIVE Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type |

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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | 1 - | R LINE NUMBER: PAGE 12 OF 19 | | | | | | | |
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| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only 21b 27 | one) 22 23 24 25 2 28a 28b 28c X 29 3 | | | | | | | |
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| NAME OF COMMITTEE (In Full) GOPAC Election Fund | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. CHAD MCCOY FOR STATE REP. | | | Date of Disbursement | | | | | | | |
| Mailing Address 447 HUTCHINS RIDGE ROAD | | | 07 28 2016 | | | | | | | |
| City | State Zip Code | | | | | | | | | |
| BARDSTOWN | KY 40004 | | Transaction ID : SB29.8096 | | | | | | | |
| Purpose of Disbursement CONTRIBUTION | | | Amount of Each Disbursement this Period | | | | | | | |
| Candidate Name | " | Category/ Type | 1000.00 | | | | | | | |
| Office Sought: House Disbursen Senate President State: District: | nent For: Primary General Other (specify) | Туре | Memo Item NON FEDERAL CONTRIBUTION | | | | | | | |
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| B. COLORADO LEADERSHIP FUND | | | Date of Disbursement | | | | | | | |
| Mailing Address PO BOX 238 | | | 07 28 2016 | | | | | | | |
| City S DENVER Purpose of Disbursement | State Zip Code CO 80201 | | Transaction ID : SB29.8104 | | | | | | | |
| CONTRIBUTION | | | Amount of Each Disbursement this Period | | | | | | | |
| Candidate Name | , | Category/ Type | 5000.00 | | | | | | | |
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| Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT MARILY! | N AVILA | | Date of Disbursement | | | | | | | |
| Mailing Address 11312 DERBY LANE | | | 07 12 2016 | | | | | | | |
| , | State Zip Code NC 27613 | | Transaction ID : SB29.8080 | | | | | | | |
| Purpose of Disbursement CONTRIBUTION Candidate Name | | Category/ Type | Amount of Each Disbursement this Period 5000.00 | | | | | | | |
| Office Sought: House Senate President State: District: | nent For: Primary General Other (specify) | Турс | Memo Item NON FEDERAL CONTRIBUTION | | | | | | | |
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| A. COMMITTEE TO ELECT RYAN W | ELD | | Man / D D / Y Y Y Y | | | | | |
| Mailing Address 2225 MARIANNA STREET | | | 07 12 2016 | | | | | |
| • | tate Zip Code WV 26070 | | Transaction ID : SB29.8082 | | | | | |
| Purpose of Disbursement CONTRIBUTION | 1 | | Amount of Each Disbursement this Period | | | | | |
| Candidate Name | , | Category/ Type | 1000.00 | | | | | |
| | nent For: Primary General Other (specify) | Турс | Memo Item NON FEDERAL CONTRIBUTION | | | | | |
| Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT JIM GOC Mailing Address 714 NORTH BROADWAY B2 | OCH, JR. | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| , | itate Zip Code KY 42450 | | Transaction ID : SB29.8095 | | | | | |
| Purpose of Disbursement CONTRIBUTION | 42400 | | Amount of Each Disbursement this Period | | | | | |
| Candidate Name | | Category/ Type | 1000.00 | | | | | |
| | ent For: Primary General Other (specify) ▼ | 77. | Memo Item NON FEDERAL CONTRIBUTION | | | | | |
| Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SARAH N | MAESTAS BARNES | | Date of Disbursement | | | | | |
| Mailing Address PO BOX 10154 | | | 07 28 2016 | | | | | |
| ALBUQUERQUE ! | tate Zip Code NM 87184 | | Transaction ID : SB29.8098 | | | | | |
| Purpose of Disbursement CONTRIBUTION Candidate Name | [| Category/ Type | Amount of Each Disbursement this Period 2500.00 | | | | | |
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| ME OF COMMITTEE (In Full) OPAC Election Fund | | | | | | | | | | | |
| Name (Last, First, Middle Initial) | | | | | Data at | D'alama | | | | | |
| OMMITTEE TO ELECT JOHN ZIMN | ИЕКМАI | N | | | Date of | Disburs | ement | Y | V | | |
| iling Address 6715 PUEBLO VISTA | | | | | 07 | | 28 | 201 | | | |
| y State S CRUCES NM | | p Code 8007 | | | Trans | action II |) : SB29 | .8100 | | | |
| rpose of Disbursement ONTRIBUTION | | | | 7 | Amount | of Each | n Disburs | sement t | this Pe | eriod | |
| ndidate Name | | | Category Type | ′/ | | | | 2 | 500.00 |) <u> </u> | |
| | t For: mary ner (specify) | General ▼ | .,,,,, | | | no Item EDERAL | CONTR | BUTION | 1 | | |
| I Name (Last, First, Middle Initial) OMMITTEE TO ELECT SHARON C illing Address PO BOX 604 | LAHCH | HISCHILL | IAGE | | Date of | | ement | 20 | | | |
| y State IIPROCK NM | | p Code 7420 | | | Trans | action II | D : SB2 9 | .8101 | | | |
| rpose of Disbursement ONTRIBUTION | | | | 7 | Amount | of Each | n Disburs | sement t | this Pe | eriod | |
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| | t For: mary ner (specify) | General ▼ | | | | no Item EDERAL | CONTR | IBUTION | ٧ | | |
| Name (Last, First, Middle Initial) OMMITTEE TO ELECT TERRY MC | MILLAN | ١ | | | | Disburs | | | | | |
| iling Address 805 ROADRUNNER CIRCLE | | | | | 07 | | 28 | 201 | | | |
| y State S CRUCES NM | | p Code 8011 | | | Trans | action II | D : SB29 | .8102 | | | |
| rpose of Disbursement ONTRIBUTION ndidate Name | | | Category Type | <i>''</i> / | Amount | of Each | n Disburs | | this Pe | - | |
| | t For: mary ner (specify) | General ▼ | | | | mo Item EDERAL | CONTR | BUTION | ١ | | |
| Senate Prim President Othe | mary er (specify) | V | | _ | | | CONTR | | | 7500.00 | |

| SCHEDULE B (FEC Form 3X) | Haraman L. L. (.) | FOR LINE | NUMBER: PAGE 15 OF 19 |
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| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | |
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| NAME OF COMMITTEE (In Full) | | | |
| GOPAC Election Fund | | | |
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| Full Name (Last, First, Middle Initial) | TC | | Date of Disbursement |
| A. DAVE RADER FOR STATE SENA | 1 | | Date of Dispursement |
| Mailing Address 8921 S HUDSON AVENUE | | | 07 28 2016 |
| City | State Zip Code | | |
| | OK 74137 | | Transaction ID : SB29.8089 |
| Purpose of Disbursement | | | |
| CONTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 1000.00 |
| Office Sought: House Disbursen | nent For: | Туре | □ Manua Isana |
| | Primary General | | Memo Item NON FEDERAL CONTRIBUTION |
| | Other (specify) ▼ | | EDELONE CONTINUOUS |
| State: District: | | | |
| Full Name (Last, First, Middle Initial) | | | |
| B. DENNY BUTLER FOR STATE RE | PRESENTATIVE | | Date of Disbursement |
| Moiling Address 4007 HO HIGHWAY 40 | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 4967 US HIGHWAY 42 | | | 07 12 2016 |
| City S LOUISVILLE | State Zip Code KY 40222 | | Transaction ID : SB29.8086 |
| Purpose of Disbursement | 40222 | | |
| CONTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 4000.00 |
| | | Type | 1000.00 |
| Office Sought: House Disbursen | | | Memo Item |
| | Primary General | | NON FEDERAL CONTRIBUTION |
| President State: District: | Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) | | | |
| FRANK JUSTICE FOR STATE RE | Р | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address PO BOX 2198 | | | 07 28 2016 |
| 0.1 | N-1- | | |
| , | State Zip Code KY 41502 | | Transaction ID: SB29.8093 |
| Purpose of Disbursement | | | |
| CÔNTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 1000.00 |
| 05 | | Type | 1000.00 |
| Office Sought: House Disbursen | | | Memo Item |
| | Primary General Other (specify) ▼ | | NON FEDERAL CONTRIBUTION |
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| NAME OF COMMITTEE (In Full) GOPAC Election Fund | | , point | | 22 22 22 22 22 22 22 22 22 22 22 22 22 |
| Full Name (Last, First, Middle Initial) | | | | Data of Dishuranment |
| - FRIENDS OF JOHN VANMETER | | | | Date of Disbursement |
| Mailing Address 1 W. MCDONALD PARKWAY | | | | 07 28 2016 |
| MAYSVILLE | State KY | Zip Code 41056 | | Transaction ID: SB29.8090 |
| Purpose of Disbursement CONTRIBUTION | | | | Amount of Each Disbursement this Period |
| Candidate Name | | | Category/ | 1000.00 |
| Office Sought: House Disburser | ment For: | | Type | |
| Senate President | ment For: Primary Other (spe | General cify) ▼ | | Memo Item NON FEDERAL CONTRIBUTION |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) JONI HOGANCAMP FOR HOUSE | OF RE | P. | | Date of Disbursement |
| Mailing Address PO BOX 9185 | | | | 07 28 2016 |
| PADUCAH | State KY | Zip Code 42002 | | Transaction ID: SB29.8097 |
| Purpose of Disbursement CONTRIBUTION | | | | Amount of Each Disbursement this Period |
| Candidate Name | | | Category/ Type | 1000.00 |
| Office Sought: House Disbursel | ment For: Primary Other (spe | General cify) ▼ | | Memo Item NON FEDERAL CONTRIBUTION |
| Full Name (Last, First, Middle Initial) - KENTUCKY SENATE REPUBLICATION | AN TRU | ST | | Date of Disbursement |
| Mailing Address PO BOX 1068 | | | | 07 |
| City FRANKFORT | State KY | Zip Code 40602 | | Transaction ID : SB2399 |
| Purpose of Disbursement VOID CHECK - DISBURSEMENT RETURNED | | | | Assessment of Freeh Diehouse week this Desired |
| Candidate Name | | | Category/ Type | Amount of Each Disbursement this Period -5000.00 |
| | | | 1,750 | |
| Office Sought: House Disbursel Senate President State: District: | Primary Other (spe | General cify) ▼ | | Memo Item |

| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | FOR LINE I | |
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| NAME OF COMMITTEE (In Full) GOPAC Election Fund | | | |
| Full Name (Last, First, Middle Initial) A. KIM MOSER FOR STATE REPRES | SENTATIVE | | Date of Disbursement |
| Mailing Address PO BOX 143 | | | 07 |
| INDEPENDENCE | tate Zip Code KY 41051 | | Transaction ID : SB29.8084 |
| Purpose of Disbursement CONTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ Type | 1000.00 |
| | nent For: Primary General Other (specify) | 71. | Memo Item NON FEDERAL CONTRIBUTION |
| Full Name (Last, First, Middle Initial) B. MARK HART FOR STATE REPRE Mailing Address 202 W. 4TH STREET | SENTATIVE | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| FLAMOUTH | tate Zip Code KY 41040 | | Transaction ID : SB29.8085 |
| Purpose of Disbursement CONTRIBUTION | | | Amount of Each Disbursement this Period |
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| | nent For: Primary ☐ General Other (specify) ▼ | | Memo Item NON FEDERAL CONTRIBUTION |
| Full Name (Last, First, Middle Initial) C. MARK HART FOR STATE REPRE | SENTATIVE | | Date of Disbursement |
| Mailing Address 202 W. 4TH STREET | | | 07 28 2016 |
| FLAMOUTH | tate Zip Code KY 41040 | | Transaction ID : SB29.8092 |
| Purpose of Disbursement CONTRIBUTION Candidate Name | | Category/ Type | Amount of Each Disbursement this Period |
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| SCHEDULE B (FEC Form 3X) | 11 | FOR LINE | NUMBER: PAGE 18 OF 19 |
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| NAME OF COMMITTEE (In Full) | | | |
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| / Full Name (Last, First, Middle Initial) | | 1 | |
| Pull Name (Last, Pilst, Middle Illina) PEOPLE FOR PAUL PACHECO | | | Date of Disbursement |
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| Mailing Address PO BOX 25022 | | | 07 28 2016 |
| City | State Zip Code | | |
| ALBUQUERQUE | NM 87125 | | Transaction ID : SB29.8099 |
| Purpose of Disbursement | | | |
| CONTRIBUTION Condidate Name | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ Type | 2500.00 |
| Office Sought: House Disbursen | nent For: | Type | Memo Item |
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| Full Name (Last, First, Middle Initial) PRATT FOR STATE REPRESENT | - A T I \ / E | | Date of Disbursement |
| - I NATITION STATE REPRESENT | AIIVL | | M M / D D / Y Y Y Y |
| Mailing Address 700 POCAHONTAS TRAIL | | | 07 14 2016 |
| 01. | 7 0 1 | | |
| City S GEORGETOWN | State Zip Code KY 40324 | | Transaction ID : SB29.8087 |
| Purpose of Disbursement | 10024 | | |
| CONTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 1000.00 |
| Office Sought: House Disbursen | nent For: | Туре | Memo Item |
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| SC HOUSE REPUBLICAN CAUCL | JS | | Date of Disbursement |
| Mailing Address PO BOX 21 | | | 07 28 2016 |
| | | | |
| • | State Zip Code SC 29202 | | Transaction ID : SB29.8103 |
| Purpose of Disbursement | SC 29202 | | |
| CÔNTRIBUTION | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 5000.00 |
| Office Cought | and Fam | Туре | 5000.00 |
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| President | Other (specify) | | NON FEDERAL CONTRIBUTION |
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| Full Name (Last, First, Middle Initial) A. STEVE RILEY FOR STATE REP. | | | Date of Disbursement |
| Mailing Address 189 BLUE SKY DRIVE | | | 07 28 2016 |
| GLASGOW | ktate Zip Code KY 42141 | | Transaction ID : SB29.8094 |
| Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Disbursem | nent For: | Category/ Type | Amount of Each Disbursement this Period |
| Senate | Primary General Other (specify) | | Memo Item NON FEDERAL CONTRIBUTION |
| Full Name (Last, First, Middle Initial) TOBY HERALD FOR STATE REP. Mailing Address PO BOX 1602 | | | Date of Disbursement O7 28 2016 |
| | | | |
| BEATTYVILLE Purpose of Disbursement | tate Zip Code KY 41311 | | Transaction ID : SB29.8091 |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Disbursem | KY 41311 | Category/ Type | Amount of Each Disbursement this Period 1000.00 Memo Item |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Disbursem Senate | KY 41311 nent For: | | Amount of Each Disbursement this Period |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Disbursem Senate President State: District: Full Name (Last, First, Middle Initial) | ent For: Primary General | | Amount of Each Disbursement this Period 1000.00 Memo Item |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address | KY 41311 nent For: Primary General Other (specify) ▼ | | Amount of Each Disbursement this Period 1000.00 Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address | ent For: Primary General | | Amount of Each Disbursement this Period 1000.00 Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City S Purpose of Disbursement Candidate Name | RY 41311 Inent For: Primary | | Amount of Each Disbursement this Period 1000.00 Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Senate Purpose of Disbursement Candidate Name Office Sought: House Senate Senate | RY 41311 Inent For: Primary | Type Category/ | Amount of Each Disbursement this Period 1000.00 Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement |
| BEATTYVILLE Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Senate Purpose of Disbursement Candidate Name Office Sought: House Senate President Senate President Disbursement | Atate Zip Code State Zip Code State Zip Code State General Other (specify) General Other (specify) Other (specify) Other (specify) | Category/ Type | Amount of Each Disbursement this Period 1000.00 Memo Item NON FEDERAL CONTRIBUTION Date of Disbursement M M / D D / Y Y Y Y Amount of Each Disbursement this Period |