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Image# 201601299004738095

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X For	r Other Than An Auth	norized Committee	Office U	Jse Only
1. NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
PATRIOT VOICES PAC				1
ADDRESS (number and street)	315 Foxtail Lane			
Check if different				
than previously reported. (ACC)	Spring City		PA 1947	5
2. FEC IDENTIFICATION NUM	BER ▼ CIT	Y A	STATE A	ZIP CODE 🛦
C C00528307		THIS EPORT X (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report	20 (M2) May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar	20 (M3) Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1) July 15	(c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q3)		M = M / D = D /	Y Y Y Y	in the
Year-End Report (YE)	Election	n on		State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	n on	Y = Y = Y	in the State of
5. Covering Period 07	01 / 2015	through 12		115
I certify that I have examined this	Report and to the best of	my knowledge and belief it is to	rue, correct and comple	ete.
Type or Print Name of Treasurer	Nadine Maenza			
Signature of Treasurer Madine 1	Maenza	[Electronically Filed]	Date 01 / 28	3 2015
NOTE: Submission of false, erroneou	us, or incomplete information	may subject the person signing	this Report to the penalt	ies of 2 U.S.C. §437g.
Office Use				C FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name PATRIOT VOICES PAC 07 2015 2015 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 437068.70 January 1, 2015 (b) Cash on Hand at 33815.67 Beginning of Reporting Period..... 340143.45 29181.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 62996.67 777212.15 6(a) and 6(c) for Column B)..... 53930.81 768146.29 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 9065.86 9065.86 (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 34619.34 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

PATRIOT VOICES PAC

	001111111111111111111111111111111111111	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	400.00	17450.00
(i) Itemized (use Schedule A)	400.00	17450.00
/// 11 % · · · ·	400.00	4321.06
(ii) Unitemized	120.00	4321.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	520.00	21771.06
Lines Tr(a)(i) and (ii)	, 020.00	7 7 21 20
(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)▶	520.00	21771.06
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
7 Mil Edulio Flocolvos		
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	656.47
. Refunds of Contributions Made	7	, ,
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	28661.00	317715.92
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
	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
(c) Total Transfers (add To(a) and To(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	29181.00	340143.45
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	29181.00	340143.45

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	5107.77	65766.78
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	5107.77	65766.78
22.	Transfers to Affiliated/Other Party		
2	CommitteesContributions to	0.00	0.00
_0.	Federal Candidates/Committees and Other Political Committees	0.00	0.00
24.	Independent Expenditures	0.00	420.94
25.	(use Schedule E)	0.00	420.94
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	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	0.00	0.00
	(such as PACs)	0.00	3.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	48823.04	701958.57
80.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(I) Federal State	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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	53930.81	768146.29
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	53930.81	768146.29
	from Line 31)	33330.01	700140.29

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)	520.00	21771.06
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	520.00	21771.06
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5107.77	65766.78
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	656.47
8. Net Operating Expenditures (subtract Line 37 from Line 36)	5107.77	65110.31

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	46	
(0	(check only one)									
	X	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 t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		
Full Name (Last, First, Middle Initial) A. JAMES P SMITH SR. Mailing Address 5517 ANNE LANE		Date of Receipt 12 07 2015
City DAYTON FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code OH 45459-1603 C Occupation RETIRED Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11.1075635 Amount of Each Receipt this Period 25.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) JAMES P SMITH SR. Mailing Address 5517 ANNE LANE City DAYTON FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code OH 45459-1603 C Occupation RETIRED Aggregate Year-to-Date ▼ 300.00	Date of Receipt 11 07 2015 Transaction ID : SA11.1075636 Amount of Each Receipt this Period 25.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) JAMES P SMITH SR. Mailing Address 5517 ANNE LANE City DAYTON FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code OH 45459-1603 C Occupation RETIRED Aggregate Year-to-Date ▼ 300.00	Date of Receipt 10 10 2015 Transaction ID: SA11.1075637 Amount of Each Receipt this Period 25.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).	<u> </u>	75.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)	ı	LINE			:	PAGE	<u>:</u>	7 OF	=
for each category of the	l `	ck only	or	, ′		l	_	1	
Detailed Summary Page		11a		11b		11c	Ш	12	_
		13		14		15		16	

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	the name and address of any political committee t	
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		
Full Name (Last, First, Middle Initial) A. JAMES P SMITH SR.		Date of Receipt
Mailing Address 5517 ANNE LANE		09 07 2015
City	State Zip Code	Transaction ID : SA11.1075639
DAYTON	OH 45459-1603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	CONTRIBUTION
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 3. JAMES P SMITH SR.		Date of Receipt
Mailing Address 5517 ANNE LANE		08 07 2015
City	State Zip Code	Transaction ID : SA11.1075641
DAYTON	OH 45459-1603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	CONTRIBUTION
RETIRED	RETIRED	
Receipt For:		-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) . JAMES P SMITH SR.		Date of Receipt
Mailing Address 5517 ANNE LANE		07 07 _ 2015 _
City	State Zip Code	Transaction ID : SA11.1075643
DAYTON	OH 45459-1603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	CONTRIBUTION
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line numb	per 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	46
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		
Full Name (Last, First, Middle Initial) MRS. ELEANOR Y. WILKERSON Mailing Address 1114 EAST 25TH ST.		Date of Receipt
City TULSA	State Zip Code OK 74114-2614	07 22 2015 Transaction ID : SA11.1075642 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00 CONTRIBUTION
Name of Employer SELF EMPLOYED	Occupation MINERAL MANAGEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	The state of the s
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		250.00
TOTAL This Period (last page this line number	r only)	400.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 46					
TEMIZED RECEIPTS		for each category of the	(check only one)					
		Detailed Summary Page	11a 11b 11c 12					
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma	ay not be sold or used by any pe	erson for the purpose of soliciting contributions					
	e name and a	daress of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC								
Full Name (Last, First, Middle Initial) MS. MARGARET L. ADAMS			Date of Receipt					
Mailing Address 8240 HEALY DR.			08 06 _ 2015 _					
City	State	Zip Code	Transaction ID : SA11.1075171					
MOBILE	AL	36695-	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer	Occupation		CONTRIBUTION					
RETIRED	RETIRED							
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		425.00	NON CONTRIBUTION ACCOUNT					
Full Name (Last, First, Middle Initial) 3. MS. MARGARET L. ADAMS			Date of Receipt					
Mailing Address 8240 HEALY DR.			10 19 2015					
City	State	Zip Code	Transaction ID : SA11.1075307					
MOBILE	AL	36695-	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		75.00					
Name of Employer RETIRED	Occupation	1	CONTRIBUTION					
Receipt For:	RETIRED							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 425.00	NON CONTRIBUTION ACCOUNT					
Full Name (Last, First, Middle Initial) C. MS. MARGARET L. ADAMS			Date of Receipt					
Mailing Address 8240 HEALY DR.			12 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City MOBILE	State AL	Zip Code 36695-	Transaction ID : SA11.1075528 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee. Name of Employer Occupation			50.00					
			CONTRIBUTION					
RETIRED	RETIRED							
Receipt For:		Voor to Data W	_					
Primary General	Aggregate	Year-to-Date ▼	NON CONTRIBUTION ACCOUNT					
Other (specify) ▼		425.00						
SUBTOTAL of Receipts This Page (optional)			225.00					

SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 46					
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
TILWILLD REVEIF IS			Detailed Summary Page	11a 11b 11c 12					
_				13 14 15 16 X 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
	PATRIOT VOICES PAC								
Α.	Full Name (Last, First, Middle Initial) MR. WALTER C BURMEISTER			Date of Receipt					
	Mailing Address 5314 S SPRINGFIELD AVE			07 31 _ 2015 _					
	City	State	Zip Code	Transaction ID : SA11.1075094					
	CHICAGO	IL	60632-3729	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		75.00					
	Name of Employer	Occupation		CONTRIBUTION					
	RETIRED	RETIRED							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		400.00	NON CONTRIBUTION ACCOUNT					
	Other (specify) ▼		400.00	J.					
В.	Full Name (Last, First, Middle Initial) MR. WALTER C BURMEISTER			Date of Receipt					
	Mailing Address 5314 S SPRINGFIELD AVE	10 26 _2015 _							
	City	State	Zip Code	Transaction ID : SA11.1075347					
	CHICAGO	IL	60632-3729	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer	Occupation		CONTRIBUTION					
	RETIRED	RETIRED							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		400.00	NON CONTRIBUTION ACCOUNT					
_	Full Name (Last, First, Middle Initial)								
C.				Date of Receipt					
	Mailing Address 5314 S SPRINGFIELD AVE			12 07 2015					
	City	State	Zip Code	Transaction ID : SA11.1075532					
	CHICAGO	IL	60632-3729	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00 CONTRIBUTION					
	Name of Employer	Name of Employer Occupation							
	RETIRED	RETIRED							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		400.00	NON CONTRIBUTION ACCOUNT					
	Strict (Specify)		100.00	1					
l s	UBTOTAL of Receipts This Page (optional)			175.00					

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 11 OF 46 (check only one)
	Detailed Summary Page	13 14 15 16 X 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r		
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		
Full Name (Last, First, Middle Initial) MR. KENNETH J CUSTER Mailing Address 766 GREEN LN		Date of Receipt
		08 07 2015
City BEDFORD	State Zip Code PA 15522-1918	Transaction ID : SA11.1075191
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 75.00
Name of Employer	Occupation	CONTRIBUTION
RETIRED Receipt For: Primary General Other (specify)	RETIRED Aggregate Year-to-Date ▼ 380.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) 3. MR. KENNETH J CUSTER		Date of Receipt
Mailing Address 766 GREEN LN	10 22 2015	
City	State Zip Code	Transaction ID : SA11.1075320
BEDFORD	PA 15522-1918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer RETIRED	Occupation	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	RETIRED Aggregate Year-to-Date ▼ 380.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) C. MR. KENNETH J CUSTER		Date of Receipt
Mailing Address 766 GREEN LN		12 07 2015
City BEDFORD	State Zip Code PA 15522-1918	Transaction ID : SA11.1075534 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	CONTRIBUTION
RETIRED	RETIRED	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	NON CONTRIBUTION ACCOUNT
SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	200.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF 46 (check only one)	
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17	
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name		erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC			
Full Name (Last, First, Middle Initial) MS. LOIS S. EDGERLY		Date of Receipt	
Mailing Address 32 HIGHLAND ST.		11 02 2015	
City St CAMBRIDGE M	ate Zip Code A 02138-2210	Transaction ID : SA11.1075412 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		50.00	
' '	upation IRED	CONTRIBUTION	
Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT	
Full Name (Last, First, Middle Initial) MR. RAYMOND N. FINK		Date of Receipt	
Mailing Address P.O. BOX 134	08 05 2015		
City St WILLIAMSTON M	ate Zip Code 48895-0134	Transaction ID : SA11.1075159 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		50.00	
RETIRED	upation RED	CONTRIBUTION	
Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 405.00	NON CONTRIBUTION ACCOUNT	
Full Name (Last, First, Middle Initial) C. MR. RAYMOND N. FINK		Date of Receipt	
Mailing Address P.O. BOX 134 City St	ata Zin Codo	12 04 2015	
WILLIAMSTON M	ate Zip Code I 48895-0134	Transaction ID : SA11.1075500 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		75.00	
' '	upation IRED	CONTRIBUTION	
Pagaint For:	regate Year-to-Date ▼ 405.00	NON CONTRIBUTION ACCOUNT	
SUBTOTAL of Receipts This Page (optional)		175.00	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 46 (check only one) 11a 11b 11c 12 13 14 15 16 🗙 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC			
Full Name (Last, First, Middle Initial) MS. RUTH K. GORMLY Mailing Address 1220 RANCHO RD City ARCADIA FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State CA C Occupation RETIRED Aggregate	Zip Code 91006-2240 Year-to-Date ▼	Date of Receipt 08 03 2015 Transaction ID: SA11.1075134 Amount of Each Receipt this Period 75.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) MS. RUTH K. GORMLY Mailing Address 1220 RANCHO RD City ARCADIA FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State CA C Occupation RETIRED Aggregate	Zip Code 91006-2240	Date of Receipt 10 19 2015 Transaction ID: SA11.1075293 Amount of Each Receipt this Period 35.00 CONTRIBUTION NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) MS. RUTH K. GORMLY Mailing Address 1220 RANCHO RD City ARCADIA FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State CA C Occupation RETIRED Aggregate	Zip Code 91006-2240 Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11.1075505 Amount of Each Receipt this Period 50.00 CONTRIBUTION NON CONTRIBUTION ACCOUNT
SUBTOTAL of Receipts This Page (optional)			160.00

SCHEDULE A (FEC Form 3X)		[Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF 46 (check only one)			
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one)			
			Detailed Suffillary Page	13 14 15 16 X 17			
	y information copied from such Reports and St for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC						
_	Full Name (Last, First, Middle Initial)						
Α.	MR. CHARLES L. HAMMOND Mailing Address 404 STEVENSON ST			Date of Receipt			
	City	State	Zip Code	07 31 2015			
	SAYRE	PA	18840-1747	Transaction ID : SA11.1075081 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		75.00			
	Name of Employer	Occupation		CONTRIBUTION			
	RETIRED Receipt For:	RETIRED	Year-to-Date ▼				
	Primary General Other (specify) ▼	Aggregate	225.00	NON CONTRIBUTION ACCOUNT			
	Guier (speerly)		7				
В.	Full Name (Last, First, Middle Initial) MS. BARBARA A JARVIS			Date of Receipt			
	Mailing Address 13923 DUNCANNON DR.	07 222015					
	City	State	Zip Code	Transaction ID : SA11.1075076			
	HOUSTON	TX	77015-	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		75.00			
	Name of Employer RETIRED	Occupation RETIRED		CONTRIBUTION			
	Receipt For:		Year-to-Date ▼				
	Primary General Other (specify) ▼	Aggregate	415.00	NON CONTRIBUTION ACCOUNT			
— С	Full Name (Last, First, Middle Initial) MR. DONALD L. LJUNGREN			Date of Receipt			
•	Mailing Address 945 CENTURY AVE SW APT 214			07 31 2015			
	City	State	Zip Code	Transaction ID : SA11.1075109			
	HUTCHINSON FEO. ID acceptation of a contribution	MN	55350-3792	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer	Occupation		CONTRIBUTION			
	RETIRED Receipt For:	RETIRED		_			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 215.00	NON CONTRIBUTION ACCOUNT			
s	UBTOTAL of Receipts This Page (optional)			200.00			

SCHEDULE A (FEC Form 3X)		[Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 OF 46 (check only one)			
ITEMIZED RECEIPTS			for each category of the	(check only one)			
			Detailed Summary Page	13 14 15 16 X 17			
	y information copied from such Reports and Sta for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC						
_	Full Name (Last, First, Middle Initial)						
Α.	MR. DONALD L. LJUNGREN			Date of Receipt			
	Mailing Address 945 CENTURY AVE SW APT 214			12 04 _ 2015 _			
	City	State	Zip Code	Transaction ID : SA11.1075511			
	HUTCHINSON	MN	55350-3792	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer	Occupation		CONTRIBUTION			
	RETIRED	RETIRED					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	NON CONTRIBUTION ACCOUNT			
	Other (specify) ▼		215.00	NON CONTRIBUTION ACCOUNT			
В.	Full Name (Last, First, Middle Initial) MS. MARIE D. MASTERS			Date of Receipt			
	Mailing Address P.O. BOX 302			12 04 2015			
	City	State	Zip Code	Transaction ID : SA11.1075513			
	WEBSTER	WI	54893-0302	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer	Occupation		CONTRIBUTION			
	RETIRED	RETIRED					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	NON CONTRIBUTION ACCOUNT			
_	Full Name (Last, First, Middle Initial) MS. MARIE D. MASTERS			Date of Receipt			
C.	Mailing Address P.O. BOX 302			Mam / Dab / Yayayay			
				12 23 2015			
	City	State WI	Zip Code 54893-0302	Transaction ID : SA11.1075618			
	WEBSTER	VVI	54893-0302	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		50.00 CONTRIBUTION				
	Name of Employer	Occupation		CONTRIBUTION			
	RETIRED	RETIRED					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	NON CONTRIBUTION ACCOUNT			
s	UBTOTAL of Receipts This Page (optional)			150.00			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 16 OF 46 (check only one)
	Detailed Summary Page	13 14 15 16 X 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		
Full Name (Last, First, Middle Initial) MR. STEVE G. MIHAYLO		Date of Receipt
Mailing Address P.O. BOX 19790		09 18 _ 2015 _
City State RENO NV	e Zip Code 89511-2471	Transaction ID : SA11.1075017
FEC ID number of contributing federal political committee.	09311-2471	Amount of Each Receipt this Period 10000.00
Name of Employer Occupa	ation	CONTRIBUTION
IMERCHANT Receipt For: Primary General Other (specify) ▼ Aggreç	gate Year-to-Date ▼ 10000.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) 3. MR. DALE OYHUS		Date of Receipt
Mailing Address 13973 FRANKS CREEK RD	10 28 2015	
City State MEDORA ND	Zip Code 58645-9700	Transaction ID: SA11.1075385
FEC ID number of contributing federal political committee.	30043 3700	Amount of Each Receipt this Period 120.00
Name of Employer Occupa SELF EMPLOYED RANCH		CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	gate Year-to-Date ▼ 270.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) MS. MARLENE W. SMITH		Date of Receipt
Mailing Address 136 DOUBLE SPRING RD		07 02 / 2015
City State SALUDA SC	e Zip Code 29138-9682	Transaction ID : SA11.1075026 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		100.00
Name of Employer Occupa RETIRED RETIR		CONTRIBUTION
Receipt For: Primary General Other (specify) ▼ Aggreç	gate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT
SUBTOTAL of Receipts This Page (optional)	•	10220.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 OF 46 (check only one)		
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial) MS. MARLENE W. SMITH Mailing Address 136 DOUBLE SPRING RD		Date of Receipt		
		07 31 2015		
•	tate Zip Code SC 29138-9682	Transaction ID : SA11.1075091		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 35.00		
' '	cupation FIRED	CONTRIBUTION		
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT		
Full Name (Last, First, Middle Initial) MS. MARLENE W. SMITH		Date of Receipt		
Mailing Address 136 DOUBLE SPRING RD	12 08 2015			
•	tate Zip Code C 29138-9682	Transaction ID : SA11.1075556		
FEC ID number of contributing federal political committee.	20.00 0002	Amount of Each Receipt this Period 50.00		
RETIRED	supation TIRED	CONTRIBUTION		
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT		
Full Name (Last, First, Middle Initial) MS. MARLENE W. SMITH		Date of Receipt		
Mailing Address 136 DOUBLE SPRING RD	The Code	12 21 2015		
,	tate Zip Code SC 29138-9682	Transaction ID : SA11.1075609 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	,	50.00		
' '	cupation	CONTRIBUTION		
Pagaint For:	TIRED	_		
Primary General Other (specify) ▼	gregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT		
SUBTOTAL of Receipts This Page (optional)		135.00		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 46 (check only one)		
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17		
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial) A. MS. TIFANY THERIAULP		Date of Receipt		
Mailing Address 13116 NW 7TH ST		08 10 2015		
City Sta YUKON Ok	•	Transaction ID : SA11.1075197 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		100.00		
INFORMATION REQUESTED PER BEST EFFC INFO	pation RMATION REQUESTED PER BEST EF	CONTRIBUTION		
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼ 245.00	NON CONTRIBUTION ACCOUNT		
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address	M = M / D = D / Y = Y = Y			
City Sta	te Zip Code	Amount of Fook Possint this Poving		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period		
Name of Employer Occu	pation			
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address	Mailing Address			
City Sta	City State Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period		
Name of Employer Occu	pation			
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)		100.00		

11740.00

SCHEDULE B (FEC Form 3X)	Llea congrate cohodule(s)	sebadula(a)		PAGE 19 OF 46
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC	e and address of any pointer	ar committee to	Solicit Contributions in	om sach commuce.
Full Name (Last, First, Middle Initial) A. NADINE MAENZA			Date of Disburseme	
Mailing Address 315 FOXTAIL LANE			07 23	2015
SPRING CITY	State Zip Code PA 19475		Transaction ID : S	SB21B.I1477
Purpose of Disbursement MANAGEMENT & FUNDRAISING CONSULTING Candidate Name			Amount of Each Dis	sbursement this Period
Office Sought: House Disbursem	nent For:	Category/ Type		400.00
Senate President	Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial) B. NADINE MAENZA		Date of Disbursemen		ent
Mailing Address 315 FOXTAIL LANE			10 22	2015
SPRING CITY	State Zip Code PA 19475		Transaction ID: \$	SB21B.I1478
Purpose of Disbursement MANAGEMENT & FUNDRAISING CONSULTING Candidate Name			Amount of Each Dis	sbursement this Period
Office Sought: House Disbursem	nent For	Category/ Type		125.00
Senate	Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. AMBASSADOR ACCOUNTING, IN	IC.		Date of Disburseme	ent
Mailing Address 7521 PRESIDENTIAL LANE			07 28	2015
,	State Zip Code VA 20109		Transaction ID : S	SB21B.I1387
ACCOUNTING SERVICES Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period 81.80
	nent For: Primary General Other (specify) ▼	Турс		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				606.80

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	dule(s) FOR LINE NUMBER: PAGE 2	
IT —	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC			
Α.	Full Name (Last, First, Middle Initial) AMBASSADOR ACCOUNTING, IN	C.		Date of Disbursement
	Mailing Address 7521 PRESIDENTIAL LANE			08 21 2015
	City S MANASSAS Purpose of Disbursement	State Zip Code VA 20109		Transaction ID : SB21B.I1389
	ACCOUNTING SERVICES			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	112.50
	President	nent For: Primary General Other (specify)		
В.	State: District: Full Name (Last, First, Middle Initial) CMDI		Date of Disbursement	
	Mailing Address 1593 SPRING HILL ROAD SUITE 400			07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	TYSONS CORNER	State Zip Code VA 22182		Transaction ID : SB21B.I1392
	Purpose of Disbursement CAGING & DATABASE SERVICES			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	1398.09
		nent For: Primary General Other (specify)		
С.	Full Name (Last, First, Middle Initial) CMDI		Date of Disbursement	
	Mailing Address 1593 SPRING HILL ROAD SUITE 400			07 23 2015
	,	tate Zip Code VA 22182		Transaction ID : SB21B.I1394
	Purpose of Disbursement EMAILS & DATABASE SERVICES Candidate Name		Category/ Type	Amount of Each Disbursement this Period 27.66
		nent For: Primary General Other (specify)	. 7,50	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 21		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Reports and Sta or for commercial purposes, other than using the		d by any perso	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial) A. CMDI			Date of Disbursement	
Mailing Address 1593 SPRING HILL ROAD SUITE 400			08 28 2015	
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID : SB21B.l1397	
Purpose of Disbursement CAGING, CREDIT CARD PROCESSING & DAT	TABASE SERVICES		Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	1450.87	
Senate President	resement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. CMDI	,			
Mailing Address 1593 SPRING HILL ROAD SUITE 400			09 21 2015	
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID : SB21B.I1398	
Purpose of Disbursement CAGING & DATABASE SERVICES			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	250.39	
Office Sought: House Senate President State: Disbur	sement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. CMDI			Date of Disbursement	
Mailing Address 1593 SPRING HILL ROAD SUITE 400			10 22 2015	
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID: SB21B.I1401	
Purpose of Disbursement CAGING & DATABASE SERVICES Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)	.,,,,		

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SCHEDULE B (FEC Form 3X)				PAGE 22 OF 46
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	e(s) (check only one)		00
	Detailed Summary Page	X 21b 27	22 28a	23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and Statem	lents may not be sold or use			
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial)			D.1. (5)	h
A. CMDI			Date of Dis	
Mailing Address 1593 SPRING HILL ROAD			12	17 2015
SUITE 400	tata Zin Cada			
•	State Zip Code VA 22182		Transaction	on ID : SB21B.I1404
Purpose of Disbursement				
DELIVERY & DATABASE SERVICES Candidate Name			Amount of I	Each Disbursement this Period
Calididate Ivaille		Category/ Type		38.72
Office Sought: House Disbursem	nent For:	.,,,,		
	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. HSP DIRECT			Date of Dis	bursement
Mailing Address 20420 LAVEVIEW OFFITED BLAZ	Λ		08 /	27 2015
Mailing Address 20130 LAKEVIEW CENTER PLAZ. SUITE 300	A		UO	27 2015
	State Zip Code		Transacti	on ID : SB21B.I1393
ASHBURN Purpose of Disbursement	VA 20147			
DIRECT MAIL			Amount of I	Each Disbursement this Period
Candidate Name		Category/		462.59
Office Sought: House Disbursem	nent For:	Туре		,
	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. KOCH & HOOS LLC			Date of Dis	bursement
			M = M /	D D / Y Y Y Y
Mailing Address 901 N WASHINGTON STREET SUITE 700				23 2015
	State Zip Code		T	on ID - CD24D 14205
ALEXANDRIA	VA 22314		ıransacti	on ID : SB21B.I1395
Purpose of Disbursement ACCOUNTING & COMPLIANCE SERVICES			Amount of I	Each Disbursement this Period
Candidate Name		Category/	Amount of I	
		Type		135.25
Office Sought: House Disburser Senate	nent For: Primary General			
	Other (specify)			
State: District:	·			
				636.56
SUBTOTAL of Disbursements This Page (optional)		·····•		030.30
TOTAL This Period (last page this line number only).		······		

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 23 OF 46
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(one of only one)		
	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b
Any information copied from such Reports and Stater	I nents may not be sold or use			
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
│ PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial)				
A. KOCH & HOOS LLC			Date of Disbursement	
Mailing Address 901 N WASHINGTON STREET			09 21	2015
SUITE 700			09 21	2013
,	State Zip Code		Transaction ID : SB2	21R I1399
ALEXANDRIA Purpose of Disbursement	VA 22314		Transaction is . Ob.	215.11000
ACCOUNTING & COMPLIANCE SERVICES			Amount of Each Disbu	ursement this Period
Candidate Name		Category/		200.22
0"		Type		209.33
Office Sought: House Disburser Senate	nent For: Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Bishamana	
B. KOCH & HOOS LLC			Date of Disbursement	Y
Mailing Address 901 N WASHINGTON STREET SUITE 700			10 22	2015
,	State Zip Code		Transaction ID : SB	21B.I1402
ALEXANDRIA Purpose of Disbursement	VA 22314			
ACCOUNTING & COMPLIANCE SERVICES			Amount of Each Disbu	ursement this Period
Candidate Name		Category/		19.53
Office Sought: House Disburser	nont For:	Туре		10.00
Senate Disburser	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. KOCH & HOOS LLC			M M / D D /	YYYY
Mailing Address 901 N WASHINGTON STREET SUITE 700			12 17	2015
,	State Zip Code		Transaction ID : SB	21B.I1403
Purpose of Disbursement	ALEXANDRIA VA 22314 Purpose of Disbursement			
ACCOUNTING & COMPLIANCE SERVICES				ursement this Period
Candidate Name		Category/		0.53
Office Sought: House Disburser	ment For:	Туре		7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				229.39
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TOTAL This Period (last page this line number only)				7

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S	CHEDULE B (FEC Form 3X)	Lies congrete cohedule(c) FOR LINI			NE NUMBER: PAGE 24 OF					OF 4	6	
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(check only			00		04 [7.5		
		Detailed Summary Page		X 21b 27	22 28a		23 28b	Н	24 28c	25 29		26 30b
Ar	ny information copied from such Reports and Staten	nents may not be sold or u	I used					of so				
	for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full)											
]/	PATRIOT VOICES PAC											
	Full Name (Last, First, Middle Initial)			Ī								_
Α.	KOCH & HOOS LLC				Date of	f Disk	ourse	men	t			
	Mailing Address 901 N WASHINGTON STREET				M M M	/	29			2015	Υ	
	SUITE 700				1,E					2010		
	,	State Zip Code			Trans	actio	on ID	: SB	321B.I14	405		
	ALEXANDRIA Purpose of Disbursement	VA 22314										
	ACCOUNTING & COMPLIANCE SERVICES		Ш		Amoun	t of E	Each	Disb	urseme	ent this	Period	
	Candidate Name			Category/				_			3.67	1
	Office Sought: House Disbursen	and Fam		Туре				-	7		3.07	4
		nent For: Primary General										
	President	Other (specify) ▼										
	State: District:											
Б	Full Name (Last, First, Middle Initial)				Data	(D:-1						
В.	PNC				Date of	DISK				Y		
	Mailing Address 825 N. WASHINGTON STREET				07		0			2015	Y	
	City S ALEXANDRIA	State Zip Code VA 22314			Trans	sactio	on ID	: SE	321B.I1	406		
	Purpose of Disbursement											
	BANK FEE		l L		Amoun	t of E	Each	Disb	urseme	ent this	Period	
	Candidate Name			Category/ Type						3	0.00	1
	Office Sought: House Disbursen	nent For:		туре		,	,		,			ī
		Primary General										
		Other (specify) ▼										
_	State: District: Full Name (Last, First, Middle Initial)											_
C.	PNC				Date of	f Disk	ourse	men	t			
					M M	/	D	D	/ Y	ΥΥΥ	Υ	
	Mailing Address 825 N. WASHINGTON STREET				08		03	3		2015		
	City	State Zip Code			T	4!-	ID			407		
		VA 22314			irans	sactio	טו חכ	: 55	321B.I1	407		
	Purpose of Disbursement BANK FEE		Ιг			. , -		D: 1				
	Candidate Name			Category/	Amoun	t of E	ach	DISD	urseme	ent this	Period	-
				Type						30	0.00	
	Office Sought: House Disbursen											
	Senate President	Primary General Other (specify)										
	State: District:	Caron (opcomy)										
							-	-			_	ī
s	SUBTOTAL of Disbursements This Page (optional)			······			,		7	63	3.67	
Ļ	OTAL This David (lost near this line much a set)											1
Lī	OTAL This Period (last page this line number only)			······		-			- 7			ш

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER: PAGE 25 OF 46			
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30l			
	y information copied from such Reports and Statem for commercial purposes, other than using the nam						
\setminus	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC						
Α.	Full Name (Last, First, Middle Initial) PNC			Date of Disbursement			
	Mailing Address 825 N. WASHINGTON STREET			09 01 2015			
	ALEXANDRIA	State Zip Code VA 22314		Transaction ID : SB21B.I1408			
	Purpose of Disbursement BANK FEE			Amount of Each Disbursement this Period			
	Candidate Name		Category/ Type	39.00			
	President	nent For: Primary General Other (specify)					
	State: District: Full Name (Last, First, Middle Initial)						
В.	PNC			Date of Disbursement			
	Mailing Address 825 N. WASHINGTON STREET			10 01 2015			
	ALEXANDRIA	State Zip Code VA 22314		Transaction ID : SB21B.I1410			
	Purpose of Disbursement BANK FEE			Amount of Each Disbursement this Period			
	Candidate Name		Category/ Type	30.00			
		nent For: Primary General Other (specify) ▼					
- -	Full Name (Last, First, Middle Initial) PNC			Date of Disbursement			
	Mailing Address 825 N. WASHINGTON STREET			11 02 2015			
	,	State Zip Code VA 22314		Transaction ID : SB21B.I1413			
	Purpose of Disbursement BANK FEE Candidate Name		Category/	Amount of Each Disbursement this Period			
		nent For: Primary General Other (specify) ▼	Туре				

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SCHEDULE B (FEC Form 3X)	FOR LINE		IE NUMBER: PAGE 26 OI				OF 46
ITEMIZED DISBURSEMENTS	NTS Use separate schedule(s) for each category of the		ily one)				1
	Detailed Summary Page	X 21k		23	24	25	26
[27	28a	28b	28c	29	30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
PATRIOT VOICES PAC							
Full Name (Last, First, Middle Initial)					_		
A. PNC			Date of	f Disburser			
Mailing Address 825 N. WASHINGTON STREET			12	01		2015	Y
City	State Zip Code		_			=	
ALEXANDRIA	VA 22314		Trans	action ID :	SB21B.I	1415	
Purpose of Disbursement BANK FEE		· · · ·	Amoun	t of Each [Disbursem	ent this I	Period
Candidate Name		Category/				47	7.00
		Type		7	7	47	7.00
	nent For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)							
В.			Date of	f Disbursen	nent		
Mailing Address			MM	/ D = [) / Y	Y	Y
Mailing Address							_
City	State Zip Code						
Purpose of Disbursement			-				
		L	Amoun	t of Each D	Disbursem	ent this F	Period
Candidate Name		Category/ Type					
Office Sought: House Disbursem	nent For:						
	Primary General						
	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) C.			Date of	f Disbursen	nent		
0.				/		YY	V
Mailing Address			M M				
City	State Zip Code						
Durana of Dialaurana art							
Purpose of Disbursement							
Candidate Name			Amoun	t of Each D	Disbursem	ent this f	eriod
		Category/ Type	Н.				
Office Sought: House Disbursen	nent For:	71.		7	7		
Senate	Primary General						
	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)					1 20	47	.00
3 () () ()			-	7	,		一
TOTAL This Period (last page this line number only)					7	5048	.94

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 26 28c X 29 30l		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC					
Full Name (Last, First, Middle Initial) • KENT ABNER			Date of Disbursement		
Mailing Address 1381 COLONEL HAWTHORN DR	RIVE		07 23 2015		
City PRAIRIE GROVE	State Zip Code AR 72753		Transaction ID : SB29.I1422		
Purpose of Disbursement GRASSROOTS CONSULTING			Amount of Each Disbursement this Period		
Candidate Name	,	Category/ Type	850.00		
Senate President	ement For: Primary		NON CONTRIBUTION ACCOUNT		
State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Mailing Address 1381 COLONEL HAWTHORN D	RIVE		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City PRAIRIE GROVE	State Zip Code AR 72753		Transaction ID : SB29.I1428		
Purpose of Disbursement GRASSROOTS CONSULTING			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	850.00		
Office Sought: House Senate President State: Disburse	ement For: Primary		NON CONTRIBUTION ACCOUNT		
Full Name (Last, First, Middle Initial) - KENT ABNER			Date of Disbursement		
Mailing Address 1381 COLONEL HAWTHORN DR	RIVE		09 22 2015		
City PRAIRIE GROVE	State Zip Code AR 72753		Transaction ID : SB29.l1435		
Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name	[Category/ Type	Amount of Each Disbursement this Period 850.00		
Office Sought: House Disburse Senate	ement For: Primary General Other (specify) \[\blacktriangleright \blacktri		NON CONTRIBUTION ACCOUNT		

Check only one)
Date of Disbursement Transaction ID: SB29.I1442 Amount of Each Disbursement this Period ategory/ Type Date of Disbursement Amount of Each Disbursement this Period NON CONTRIBUTION ACCOUNT Date of Disbursement Date of Disbursement Date of Disbursement
Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID: SB29.I1442 Amount of Each Disbursement this Period 850.00 NON CONTRIBUTION ACCOUNT Date of Disbursement 07 23 2015
Transaction ID : SB29.I1442 Amount of Each Disbursement this Period 850.00 NON CONTRIBUTION ACCOUNT Date of Disbursement 07 23 2015
Amount of Each Disbursement this Period ategory/ Type NON CONTRIBUTION ACCOUNT Date of Disbursement 07 23 2015
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NON CONTRIBUTION ACCOUNT Date of Disbursement 07 23 2015
Date of Disbursement 07
07 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID + SP20 I4424
Amount of Each Disbursement this Period
ategory/ Type 1000.00
NON CONTRIBUTION ACCOUNT
Date of Disbursement
08 28 2015
Transaction ID : SB29.I1427
Amount of Each Disbursement this Period ategory/ Type 1000.00
NON CONTRIBUTION ACCOUNT

_	CHEDULE B (FEC Form 3X)	Use separate s	chedula(s)	-	R LINE NUMBER: PAGE 29 OF				
T	EMIZED DISBURSEMENTS	for each catego	ory of the	(check only 21b	one) 22	<u>26</u>			
		Detailed Summ	ary Page	27	28a 28b 28c X 29	30b			
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam								
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC								
۹.	Full Name (Last, First, Middle Initial) JOHN KILE				Date of Disbursement				
					M M / D D / Y W Y W	Υ			
	Mailing Address 7820 CONTEE ROAD APT 416				09 22 2015				
	City S LAUREL	State Zip (MD 207)	Code 07		Transaction ID : SB29.I1434				
	Purpose of Disbursement GRASSROOTS CONSULTING		Г		Amount of Each Disbursement this P	eriod			
	Candidate Name		-	Category/	1000.	00			
	Office Sought: House Disbursen	nent For:		Туре					
	President	Primary Other (specify)	General		NON CONTRIBUTION ACCOUNT				
	State: District: Full Name (Last, First, Middle Initial)								
3.	JOHN KILE				Date of Disbursement	V			
	Mailing Address 7820 CONTEE ROAD APT 416				10 22 2015	Y			
	LAUREL	State Zip (MD 207	Code 07		Transaction ID : SB29.I1443				
	Purpose of Disbursement GRASSROOTS CONSULTING				Amount of Each Disbursement this P	eriod			
	Candidate Name			Category/ Type	1000.	00			
		nent For: Primary Other (specify)	General		NON CONTRIBUTION ACCOUNT				
	Full Name (Last, First, Middle Initial) JENNIFER KINNAIRD				Date of Disbursement				
Э.									
С.	Mailing Address 21015 VILLA VALENCIA				07 D D / Y Y Y Y T Y T Y T Y T Y T Y T Y T Y T	Y			
Э.	City		Code		M M / D D / Y Y Y	Y			
С.		State Zip (TX 782			07 23 / 2015 Transaction ID : SB29.l1423				
Э.	City S SAN ANTONIO Purpose of Disbursement		58	Category/	07 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	eriod			
O.	City SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name Office Sought: House Disbursen Senate	TX 782:	General	Category/ Type	Transaction ID : SB29.I1423 Amount of Each Disbursement this P	eriod			
	City SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name Office Sought: House Senate President State: District:	nent For: Primary Other (specify)	General	Type	Transaction ID : SB29.I1423 Amount of Each Disbursement this P	eriod			
	City SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name Office Sought: House Senate President	nent For: Primary Other (specify)	General	Type	Transaction ID : SB29.I1423 Amount of Each Disbursement this P 425. NON CONTRIBUTION ACCOUNT	eriod			

SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name		21b 27 used by any perso	22 23 24 25 36 28a 28b 28c × 29 36 on for the purpose of soliciting contributions of solicit contributions from such committee. Date of Disbursement 08 28 2015 Transaction ID: SB29.I1429
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC Full Name (Last, First, Middle Initial) A. JENNIFER KINNAIRD Mailing Address 21015 VILLA VALENCIA City St. SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name	and address of any poli		Date of Disbursement 08 28 2015 Transaction ID: SB29.I1429
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC Full Name (Last, First, Middle Initial) A. JENNIFER KINNAIRD Mailing Address 21015 VILLA VALENCIA City Stan Antonio Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name	ate Zip Code		Date of Disbursement 08 28 2015 Transaction ID: SB29.I1429
A. JENNIFER KINNAIRD Mailing Address 21015 VILLA VALENCIA City St. SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name			08 28 2015 Transaction ID : SB29.I1429
City St SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name			08 28 2015 Transaction ID : SB29.I1429
SAN ANTONIO Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name			
GRASSROOTS CONSULTING Candidate Name			Amount of Each Dishumana and this D. C.
			Amount of Each Disbursement this Period
		Category/ Type	425.00
President	ent For: Primary General Other (specify)		NON CONTRIBUTION ACCOUNT
State: District: Full Name (Last, First, Middle Initial) 3. JENNIFER KINNAIRD Mailing Address 21015 VILLA VALENCIA			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	ate Zip Code FX 78258		Transaction ID : SB29.I1436
Purpose of Disbursement GRASSROOTS CONSULTING			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	425.00
	ent For: Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial) JENNIFER KINNAIRD			Date of Disbursement
Mailing Address 21015 VILLA VALENCIA			10 22 2015
SAN ANTONIO T	ate Zip Code X 78258		Transaction ID : SB29.I1444
Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburseme	ent For:	Type	425.00
Senate	Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT
SUBTOTAL of Disbursements This Page (optional)			1275.00

	21b 27 sed by any perso	one) 22 23 24 25 26 28a 28b 28c 29 30 on for the purpose of soliciting contributions solicit contributions from such committee.
		Date of Disbursement
		07
e Zip Code 19475		Transaction ID : SB29.l1419
		Amount of Each Disbursement this Period
	Category/ Type	4600.00
nt For: mary General mer (specify) ▼		NON CONTRIBUTION ACCOUNT
		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
e Zip Code 19475		Transaction ID : SB29.I1440
		Amount of Each Disbursement this Period
	Category/ Type	4875.00
t For: mary General ner (specify) ▼		NON CONTRIBUTION ACCOUNT
		Date of Disbursement
		07 23 2015
e Zip Code 46148		Transaction ID : SB29.I1420
	Category/ Type	Amount of Each Disbursement this Period
t For: mary General ner (specify) ▼	- JPC	NON CONTRIBUTION ACCOUNT
	t For: mary General ner (specify) General de Zip Code 46148	Category/ Type tt For: mary General ner (specify) Category/ Type Category/ Type tt For: mary General ner (specify) Category/ Type tt For: mary General ner (specify) Category/ Type tt For: mary General ner (specify) General Category/ Type

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	NE NUMBER: PAGE 32 OF 46			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC	io and dadroce of any pointed.		GOIGH GOTHINGUIGHO TOTH GUGH GOTHINAGO.			
Full Name (Last, First, Middle Initial) A. ANGELA MOORE			Date of Disbursement			
Mailing Address 5734 W. CO RD 450 S			M M / D D / Y Y Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z			
City	State Zip Code		Transportion ID ODGG 14400			
KNIGHTSTOWN	IN 46148		Transaction ID: SB29.l1426			
Purpose of Disbursement GRASSROOTS CONSULTING	1		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)	Турс	NON CONTRIBUTION ACCOUNT			
Full Name (Last, First, Middle Initial) B. ANGELA MOORE Mailing Address 5734 W. CO RD 450 S			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
KNIGHTSTOWN	State Zip Code IN 46148		Transaction ID : SB29.I1433			
Purpose of Disbursement GRASSROOTS CONSULTING			Amount of Each Disbursement this Period			
Candidate Name	,	Category/ Type	1000.00			
	nent For: Primary General Other (specify)	71	NON CONTRIBUTION ACCOUNT			
Full Name (Last, First, Middle Initial) C. ANGELA MOORE			Date of Disbursement			
Mailing Address 5734 W. CO RD 450 S			10 22 2015			
City S KNIGHTSTOWN	State Zip Code IN 46148		Transaction ID : SB29.I1441			
Purpose of Disbursement GRASSROOTS CONSULTING Candidate Name]	Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Senate President State: Disbursen	nent For: Primary General Other (specify)	71	NON CONTRIBUTION ACCOUNT			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			3000.00			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 33 OF				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	one)			
	for each category of the Detailed Summary Page		22 23 24 25 26			
[27	28a 28b 28c X 29 30b			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	io and address of any pointed		Const. Contributions from Cash. Committee.			
PATRIOT VOICES PAC						
/						
Full Name (Last, First, Middle Initial)			Data of Dishamount			
A. DARLENE RAIMONDI			Date of Disbursement			
Mailing Address 938 CONGRESS COURT			07 23 2015			
,	State Zip Code		Transaction ID : SB29.I1424			
CASSELBERRY Purpose of Disbursement	FL 32707					
GRASSROOTS CONSULTING			Amount of Each Disbursement this Period			
Candidate Name		Category/				
		Type	650.00			
Office Sought: House Disburser						
Senate President	Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT			
State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
B. DARLENE RAIMONDI			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address 938 CONGRESS COURT			08 28 2015			
City	State Zip Code		T :: ID ODGG 14400			
CASSELBERRY	FL 32707		Transaction ID : SB29.I1430			
Purpose of Disbursement GRASSROOTS CONSULTING			Assessed of Early Dishark would this Desired			
Candidate Name			Amount of Each Disbursement this Period			
Canadate Name		Category/ Type	650.00			
Office Sought: House Disbursen	nent For:	.,,,,	, ,			
Senate	Primary General		NON CONTRIBUTION ACCOUNT			
President	Other (specify) ▼					
State: District: Full Name (Last, First, Middle Initial)						
C. DARLENE RAIMONDI			Date of Disbursement			
- DARLENE RAIMONDI			M M / D D / Y Y Y			
Mailing Address 938 CONGRESS COURT			09 22 2015			
City	State Zip Code					
City S CASSELBERRY	State Zip Code FL 32707		Transaction ID : SB29.I1437			
Purpose of Disbursement						
GRASSROOTS CONSULTING			Amount of Each Disbursement this Period			
Candidate Name		Category/	650.00			
Office Sought: House Disburser	nent For:	Туре				
Senate	Primary General		NON CONTRIBUTION ACCOUNT			
President	Other (specify) ▼					
State: District:						
		· · · · · ·	1950.00			
SUBTOTAL of Disbursements This Page (optional)		·····•	1930.00			
TOTAL This Period (last page this line number only)						

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SCHEDULE B (FEC Form 3X)		FOR LINE	PAGE 34 OF 46	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(official official of		
	Detailed Summary Page	21b	22 23	24 25 26
Г			28a 28b	28c 🗙 29 30b
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,			
PATRIOT VOICES PAC				
/ /////////////////////////////////////				
Full Name (Last, First, Middle Initial)				
A. DARLENE RAIMONDI			Date of Disburseme	nt
Mailing Address 938 CONGRESS COURT			10 22	2015
Maining Address 930 CONGRESS COOK			10 22	2013
City	State Zip Code		Transaction ID : S	P20 11445
CASSELBERRY	FL 32707		Transaction ib . 3	D29.11443
Purpose of Disbursement GRASSROOTS CONSULTING			Amount of Each Dis	bursement this Period
Candidate Name			Amount of Each Dis	bursement this renou
		Category/ Type		650.00
Office Sought: House Disburs	ement For:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,
Senate	Primary General		NON CONTRIBUTIO	N ACCOUNT
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. BANK OF AMERICA			Date of Disburseme	nt
5. BANK OF AMERICA			M M / D D	/ Y Y Y Y Y
Mailing Address 150 N. COLLEGE STREET			07 06	2015
City CHARLOTTE	State Zip Code NC 28202		Transaction ID : S	B29.I1452
Purpose of Disbursement	20202			
CREDIT CARD & MERCHANT FEES			Amount of Each Dis	bursement this Period
Candidate Name		Category/		470.50
		Type		179.58
Office Sought: House Disburs Senate	ement For:			
President	Primary General Other (specify) ▼		NON CONTRIBUTIO	N ACCOUNT
State: District:	Carlot (opcomy)			
Full Name (Last, First, Middle Initial)				
C. BANK OF AMERICA			Date of Disburseme	nt
			M = M / D = D	/ Y = Y = Y
Mailing Address 150 N. COLLEGE STREET			08 03	2015
City	State Zip Code			
CHARLOTTE	NC 28202		Transaction ID : S	B29.l1456
Purpose of Disbursement CREDIT CARD & MERCHANT FESS				
			Amount of Each Dis	bursement this Period
Candidate Name		Category/		108.78
Office Sought: House Disburs	ement For:	Туре		
Senate	Primary General		NON CONTRIBUTIO	N ACCOUNT
President	Other (specify) ▼		11011 0011111100110	
State: District:				
				222.22
SUBTOTAL of Disbursements This Page (optional)		·····		938.36
TOTAL This Period (last page this line number on				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	PAGE PAGE PAGE		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 24 25 26 28a 28b 28c X 29 30k	
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NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC				
Full Name (Last, First, Middle Initial)			Data of Dishumanant	
A. BANK OF AMERICA			Date of Disbursement	
Mailing Address 150 N. COLLEGE STREET			09 04 2015	
City CHARLOTTE	State Zip Code NC 28202		Transaction ID : SB29.l1460	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES	Г		Amount of Each Disbursement this Period	
Candidate Name	-	Category/ Type	119.69	
Senate President	rsement For: Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT	
State: District: Full Name (Last, First, Middle Initial)				
B. BANK OF AMERICA		Date of Disbursement		
Mailing Address 150 N. COLLEGE STREET			10 05 2015	
City CHARLOTTE	State Zip Code NC 28202		Transaction ID : SB29.I1464	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES	IΓ		Amount of Each Disbursement this Period	
Candidate Name	-	Category/ Type	51.83	
Office Sought: House Disbutions Senate President State: District:	rsement For: Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT	
Full Name (Last, First, Middle Initial) C. BANK OF AMERICA			Date of Disbursement	
Mailing Address 150 N. COLLEGE STREET			11 04 2015	
City CHARLOTTE	State Zip Code NC 28202		Transaction ID : SB29.l1468	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbu	rsement For: Primary General Other (specify)	71	NON CONTRIBUTION ACCOUNT	

S	CHEDULE B (FEC Form 3X)			OR I INF	INE NUMBER: PAGE 36 OF 46				
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	s) (a	check only	one)				
		Detailed Summary Page		21b	22 23 24 25 26				
		, ,		27	28a 28b 28c X 29 30				
	y information copied from such Reports and Staten for commercial purposes, other than using the nan								
V Or		ie anu audress di any polit	ucai COI	mmuee to	o someti continuutions nom such committee.				
$ \rangle$	NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC								
	FATRIOT VOICES PAC								
	Full Name (Last, First, Middle Initial)								
Α.	BANK OF AMERICA				Date of Disbursement				
	AA-Way Address (FOX)				M M / D D / Y Y Y Y				
	Mailing Address 150 N. COLLEGE STREET				12 04 2015				
	City	State Zip Code							
	CHARLOTTE	NC 28202			Transaction ID : SB29.I1473				
	Purpose of Disbursement CREDIT CARD & MERCHANT FEES				Amount of Foots Distance of the Distance of th				
	Candidate Name		↓		Amount of Each Disbursement this Period				
	Canadate Name			egory/ ype	66.78				
	Office Sought: House Disburser	nent For:	<u>'</u>	, P~					
	Senate	Primary General			NON CONTRIBUTION ACCOUNT				
	President	Other (specify) ▼							
_	State: District:								
В.	Full Name (Last, First, Middle Initial)				Date of Disbursement				
υ.	CMDI								
	Mailing Address 1593 SPRING HILL ROAD				07 23 2015				
	SUITE 400								
	City STYSONS CORNER	State Zip Code VA 22182			Transaction ID : SB29.I1417				
	Purpose of Disbursement	22102							
	CREDIT CARD PROCESSING & DATABASE SERVICES			[]	Amount of Each Disbursement this Period				
	Candidate Name			egory/	230.74				
	Office Cought	and Fam		уре	230.74				
	Office Sought: House Disburser Senate	nent For: Primary General			NON CONTRIBUTION ACCOUNT				
	President	Other (specify)			NON CONTRIBUTION ACCOUNT				
	State: District:	J, ♥							
	Full Name (Last, First, Middle Initial)								
C.	CMDI				Date of Disbursement				
	Moiling Address 4500 ODDING LILL DOAD				M M / D D / Y Y Y Y Y				
	Mailing Address 1593 SPRING HILL ROAD SUITE 400				08 28 2015				
		State Zip Code			Transaction ID : SB29.I1425				
	TYSONS CORNER	VA 22182			11d115dCt(1011 D . 3DZ3.114Z3				
	Purpose of Disbursement CREDIT CARD PROCESSING, EMAILS & DATABA	ASE SERVICES		-					
Candidate Name			با ا		Amount of Each Disbursement this Period				
				egory/ ype	237.52				
	Office Sought: House Disburser	nent For:	1						
	Senate	Primary General			NON CONTRIBUTION ACCOUNT				
	President	Other (specify) ▼							
_	State: District:								
[IIPTOTAL of Dishurasments This Dage (entire-1)				535.04				
dash	UBTOTAL of Disbursements This Page (optional)			······ •					
т	OTAL This Period (last page this line number only)								

Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC		21b 27 sed by any perso	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)		sed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)			
,			Solicit Continuations from Such Committee.
/ PATRIOT VOICES PAC			
Full Name (Last, First, Middle Initial)			Data of Diahuraamant
- CMDI			Date of Disbursement
Mailing Address 1593 SPRING HILL ROAD SUITE 400			09 21 2015
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID : SB29.I1431
Purpose of Disbursement	22102		
DATABASE SERVICES			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	235.75
Office Sought: House Disburs	ement For:	1,700	
Senate	Primary General		NON CONTRIBUTION ACCOUNT
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
- CMDI			Date of Disbursement
Mailing Address 1593 SPRING HILL ROAD SUITE 400			10 22 2015
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID: SB29.I1438
Purpose of Disbursement DATABASE SERVICES			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	243.75
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial)			Date of Disbursement
CMDI			M M / D D / Y Y Y Y
Mailing Address 1593 SPRING HILL ROAD SUITE 400			12 17 2015
City TYSONS CORNER	State Zip Code VA 22182		Transaction ID : SB29.I1447
Purpose of Disbursement CREDIT CARD PROCESSING & DATABASE SE	RVICES		Amount of Each Disbursement this Period
Candidate Name		Category/	498.98
Office Sought: House Disburs	ement For:	Туре	
Senate	Primary General		NON CONTRIBUTION ACCOUNT
President	Other (specify) ▼		
		I	
State: District:			
SUBTOTAL of Disbursements This Page (optional))		978.48

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SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 38 OF 46				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)					
	Detailed Summary Page	21b 27	22 23 28b	24 25 26 28c X 29 30b			
Any information copied from such Reports and State	ments may not be sold or use						
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
$ \; angle$ PATRIOT VOICES PAC							
Full Name (Last, First, Middle Initial)							
A. FIRSTMERIT BANK			Date of Disburseme	ent			
			M M / D D	/ Y Y Y Y			
Mailing Address 295 FIRSTMERIT CIRCLE	Mailing Address 295 FIRSTMERIT CIRCLE						
City	State Zip Code						
AKRON	OH 44307		Transaction ID : S	B29.I1454			
Purpose of Disbursement BANK FEE							
Candidate Name			Amount of Each Dis	sbursement this Period			
Candidate Name		Category/ Type		104.91			
Office Sought: House Disburse	ement For:	Турс		,			
Senate	Primary General		NON CONTRIBUTIO	N ACCOUNT			
President	Other (specify)						
State: District: Full Name (Last, First, Middle Initial)							
B. FIRSTMERIT BANK			Date of Disburseme	ent			
- INCOMERCI BARR		M = M / D = D	/				
Mailing Address 295 FIRSTMERIT CIRCLE			08 14	2015			
City	State Zip Code						
AKRON	OH 44307		Transaction ID : S	6B29.I1458			
Purpose of Disbursement BANK FEE			American of Feels Die	hamana and Alain Davidad			
Candidate Name			Amount of Each Dis	sbursement this Period			
		Category/ Type		107.88			
Office Sought: House Disburse	ement For:						
Senate President	Primary General		NON CONTRIBUTIO	ONTRIBUTION ACCOUNT			
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. FIRSTMERIT BANK			Date of Disburseme	nt			
A		M M / D D	/				
Mailing Address 295 FIRSTMERIT CIRCLE			09 15	2015			
City	State Zip Code		Transaction ID : S	P20 14 462			
AKRON	OH 44307		Transaction ID: 3	0029.11403			
Purpose of Disbursement BANK FEE							
Candidate Name		Category/	Amount of Each Dis	sbursement this Period			
		Type		107.62			
	ement For:			,			
Senate President	Primary General Other (specify) ▼		NON CONTRIBUTIO	N ACCOUNT			
State: District:	Other (specify)						
SUBTOTAL of Disbursements This Page (optional)				320.41			
TOTAL This Period (last page this line number onl	y)						

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SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 39 OF 46			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)				
	Detailed Summary Page	21b 27	22 23 28b	24 25 26 28c × 29 30b		
Any information copied from such Reports and State	ments may not be sold or use					
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
PATRIOT VOICES PAC						
Full Name (Last, First, Middle Initial)						
A. FIRSTMERIT BANK			Date of Disbursemen	t		
Mailing Address 295 FIRSTMERIT CIRCLE			10 15	2015		
City	State Zip Code					
AKRON	OH 44307		Transaction ID : SE	329.11466		
Purpose of Disbursement BANK FEE			Amount of Each Disb	oursement this Period		
Candidate Name		Category/		96.10		
05.		Type		86.10		
Office Sought: House Disburse Senate	ement For: Primary General		NON CONTRIBUTION	LACCOLINIT		
President	Other (specify)		NON CONTRIBUTION	ACCOUNT		
State: District:						
Full Name (Last, First, Middle Initial)						
B. FIRSTMERIT BANK			Date of Disbursemen			
Mailing Address 295 FIRSTMERIT CIRCLE		11 16	2015			
City AKRON	State Zip Code OH 44307		Transaction ID : SE	329.11470		
Purpose of Disbursement	OH 44307					
BANK FEE			Amount of Each Disk	ursement this Period		
Candidate Name		Category/		85.36		
Office Sought: House Disburse	ement For:	Туре				
Senate	Primary General		NON CONTRIBUTION	N ACCOUNT		
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) C. FIRSTMERIT BANK			Date of Disbursemen	†		
S. FIRSTWERT DAIN			M M / D D	/		
Mailing Address 295 FIRSTMERIT CIRCLE			12 14	2015		
City	State Zip Code					
AKRON	OH 44307		Transaction ID : SE	329.11475		
Purpose of Disbursement BANK FEE						
Candidate Name			Amount of Each Disk	oursement this Period		
		Category/ Type		96.17		
	ement For:					
Senate	Primary General		NON CONTRIBUTION	I ACCOUNT		
State: District:	Other (specify) ▼					
State. District.						
SUBTOTAL of Disbursements This Page (optional)				267.63		
aga (optional)						
TOTAL This Period (last page this line number only	/)			7		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 40 OF 46
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c y 29 30b
Anninformation and of form such D	and many set by 100	27	
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	,,		
PATRIOT VOICES PAC			
Full Name (Lock First Middle Intitial)			
Full Name (Last, First, Middle Initial) A. FOLEY & LARDNER			Date of Disbursement
- I OLE I & LANDINER			M M / D D / Y Y Y Y
Mailing Address 3000 K STREET, NW			10 22 2015
SUITE 600	State Zin Code		
City S WASHINGTON	State Zip Code DC 20007		Transaction ID : SB29.I1439
Purpose of Disbursement			
LEGAL SERVICES			Amount of Each Disbursement this Period
Candidate Name		Category/	180.00
Office Sought: House Disbursen	nent For:	Туре	
	Primary General		NON CONTRIBUTION ACCOUNT
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. INFOCISION			Date of Disbursement
		M M / D D / Y Y Y Y	
Mailing Address 325 SPRINGSIDE DRIVE		07 30 2015	
City	State Zin Code		
City S AKRON	State Zip Code OH 44333		Transaction ID : SB29.I1455
Purpose of Disbursement TELEMARKETING			
Candidate Name			Amount of Each Disbursement this Period
Sandidate Hame		Category/ Type	2764.60
Office Sought: House Disbursen	nent For:	.,,,,	, , , , , , , , , , , , , , , , , , , ,
	Primary General		NON CONTRIBUTION ACCOUNT
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. INFOCISION			Date of Disbursement
		M M / D D / Y Y Y Y	
Mailing Address 325 SPRINGSIDE DRIVE			09 10 2015
City	State Zip Code		Transaction ID : SB29.I1462
	OH 44333		11402
Purpose of Disbursement TELEMARKETING			Amount of Each Disbursement this Period
Candidate Name	Category/		
		Type	5799.07
Office Sought: House Disbursen Senate			
	Primary General Other (specify) ▼		NON CONTRIBUTION ACCOUNT
State: District:	VI - 7/ ▼		
SUBTOTAL of Disbursements This Page (optional)		············· >	8743.67
TOTAL This Period (last page this line number only)			

S	CHEDULE B (FEC Form 3X)	Harrison L. L. C.	FOR LINE NUMBER: PAG		AGE	41 (OF 46					
ΙT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 21b 22 27 28a			23 28b	24		25 29			
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or	for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	ne and address of any politica	al com	nmit	tee to	solicit co	ntrib	utions	from s	uch cor	mmit	tee.
	PATRIOT VOICES PAC											
Δ	Full Name (Last, First, Middle Initial) INFOCISION					Date o	f Die	shurse	ment			
Λ.	INFOCISION					M = M	_	D		Y Y	Y	Υ
	Mailing Address 325 SPRINGSIDE DRIVE					11	_	3	0	_ 20	15	
	City AKRON	State Zip Code OH 44333				Trans	sacti	ion ID	: SB29	.11471		
	Purpose of Disbursement	OH 44333			=							
	TELEMARKETING		Γ.			Amoun	t of	Each	Disburs	ement	this	Period
	Candidate Name		Cate					-	-		5124	1.09
	Office Sought: House Disburse	ment For:	Ту	ype				7				
	Senate President	Primary General Other (specify) ▼				NON C	ONT	ribu	TION A	CCOUN	ΝT	
	State: District:											
В.	Full Name (Last, First, Middle Initial) KOCH & HOOS LLC					Date o	_	sburse		Y = Y	Y	Y
	Mailing Address 901 N WASHINGTON STREET SUITE 700					07 23 2015						
	City ALEXANDRIA	State Zip Code VA 22314				Trans	sact	ion ID	: SB29	.11418		
	Purpose of Disbursement ACCOUNTING & COMPLIANCE SERVICES			Ī		Amount of Each Disbursement this			this	Period		
	Candidate Name		Cate	egor ype	ry/			,			155	5.40
	Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify)	-			NON C	ONT	ΓRIBU	TION A	CCOUN	NT	
C.	Full Name (Last, First, Middle Initial) KOCH & HOOS LLC					Date o	_	sburse			Y	V
	Mailing Address 901 N WASHINGTON STREET SUITE 700					09		2		20		
	City ALEXANDRIA	State Zip Code VA 22314				Trans	sact	ion ID	: SB29	.11432		
	Purpose of Disbursement ACCOUNTING & COMPLIANCE SERVICES Candidate Name					Amount of Each Disbursement this Period			Period			
	Candidate Marile		Cate Ty	egor ype			Ξ				3463	3.17
	Senate President	ment For: Primary General Other (specify)				NON C	ONT	(RIBU	TION A	CCOUN	ΙΤ	
	State: District:											
s	SUBTOTAL of Disbursements This Page (optional).				•		_	7		1	0142	2.66
1	OTAL This Period (last page this line number only)			•	L	_	,				

llea caparata cobodula(a)	FOR LINE NUMBER: PAGE			
for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30		
		B (B)		
		Date of Disbursement		
Mailing Address 901 N WASHINGTON STREET SUITE 700				
State Zip Code VA 22314		Transaction ID : SB29.I1446		
		Amount of Each Disbursement this Period		
	Category/	761.72		
ement For: Primary General Other (specify)	.,,,,	NON CONTRIBUTION ACCOUNT		
KOCH & HOOS LLC				
		12 17 2015		
State Zip Code VA 22314		Transaction ID: SB29.I1448		
urpose of Disbursement ACCOUNTING & COMPLIANCE SERVICES				
	Category/ Type	276.97		
ement For: Primary General Other (specify) ▼	,,	NON CONTRIBUTION ACCOUNT		
		Date of Disbursement		
		12 29 2015		
State Zip Code VA 22314		Transaction ID : SB29.I1449		
		A (5 B)		
	Category/ Type	Amount of Each Disbursement this Period 828.83		
ment For: Primary General	71	NON CONTRIBUTION ACCOUNT		
	State Zip Code VA 22314 State Zip Code VA 22314	Use separate schedule(s) for each category of the Detailed Summary Page ements may not be sold or used by any personal particle and address of any political committee to some and address of any political committee to category/ Type ement For: Primary General Other (specify) State Zip Code VA 22314 State Zip Code VA 22314 Category/ Type ement For: Primary General Other (specify) Category/ Type ement For:		

		one) 22 23 24 25 26 28a 28b 28c X 29 30l on for the purpose of soliciting contributions solicit contributions from such committee.	
ments may not be sold or use	d by any perso	on for the purpose of soliciting contributions	
		Date of Disbursement	
		M M / D D / Y Y Y Y	
		07 07 2015	
State Zip Code			
CA 90010		Transaction ID: SB29.I1453	
		Amount of Each Disbursement this Period	
	Category/	20.00	
mont For:	Type	20.00	
Primary General		NON CONTRIBUTION ACCOUNT	
Other (specify) ▼		Her commission, account	
		Date of Disbursement	
· USA AEPAY			
		08 06 2015	
'		Transaction ID : SB29.I1457	
		Amount of Each Disbursement this Period	
ndidate Name			
	Type	20.00	
		NON CONTRIBUTION ACCOUNT	
Other (specify) ▼		NON CONTRIBUTION ACCOUNT	
		Date of Disbursement	
		M M / D D / Y Y Y Y	
		09 08 2015	
State Zip Code		Transaction ID : SB29.I1461	
CA 90010		Hallsaction ib . 3B29.11401	
		Amount of Each Disbursement this Period	
	Category/ Type	20.00	
ment For:	71		
Primary General		NON CONTRIBUTION ACCOUNT	
Other (specify)			
		60.00	
	ment For: Primary General Other (specify) ▼ State Zip Code CA 90010 ment For: Primary General Other (specify) ▼ State Zip Code CA 90010 State Zip Code CA 90010 State Zip Code CA 90010	CA 90010 Category/ Type ment For: Primary General Other (specify) Category/ Type Category/ Type ment For: Primary General Other (specify) Category/ Type Category/ Type	

SCHEDULE B (FEC Form 3X)	Llos concrete cole advisor	PAGE PAGE			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orliny orle)			
	Detailed Summary Page	21b 27	22 23 28b	24 25 26 28c X 29 30	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC					
Full Name (Last, First, Middle Initial)					
A. USA AEPAY			Date of Disburseme	nt	
Mailing Address 4929 WILSHIRE BLVD SUITE 800			10 07	2015	
LOS ANGELEL	State Zip Code CA 90010		Transaction ID : S	B29.I1465	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES			Amount of Each Dis	sbursement this Period	
Candidate Name	,	Category/ Type		20.00	
President	nent For: Primary General Other (specify)	Nr.	NON CONTRIBUTIO	N ACCOUNT	
State: District: Full Name (Last, First, Middle Initial)					
B. USA AEPAY	USA AEPAY				
Mailing Address 4929 WILSHIRE BLVD SUITE 800			11 06 2015		
LOS ANGELEL	State Zip Code CA 90010		Transaction ID : S	B29.I1469	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES			Amount of Each Dis	bursement this Period	
Candidate Name	,	Category/ Type	7	20.00	
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)		NON CONTRIBUTIO	ON ACCOUNT	
Full Name (Last, First, Middle Initial) C. USA AEPAY			Date of Disburseme		
Mailing Address 4929 WILSHIRE BLVD SUITE 800			12 08	2015	
City S LOS ANGELEL	State Zip Code CA 90010		Transaction ID : S	B29.l1474	
Purpose of Disbursement CREDIT CARD & MERCHANT FEES			Amount of Each Dis	bursement this Period	
Candidate Name		Category/ Type	7	20.00	
Office Sought: House Senate President State: Disburser	nent For: Primary General Other (specify) ▼		NON CONTRIBUTIO	N ACCOUNT	
SUBTOTAL of Disbursements This Page (optional)				60.00	
TOTAL This Period (last page this line number only)				48760.48	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE

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9 **X** 10

46

NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MANAGEMENT & FUNDRAISING NADINE MAENZA CONSULTING Mailing Address 315 FOXTAIL LANE State Zip Code SPRING CITY 19475 Transaction ID: SD10.60105 Outstanding Balance Beginning This Period 20000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 20000.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **IE - MEDIA PRODUCTION** BRABENDER COX LLC Mailing Address 1218 GRANDVIEW AVENUE City State Zip Code **PITTSBURGH** 15211 PΑ Outstanding Balance Beginning This Period Transaction ID: SD10.60100 3250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3250.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MEDIA PRODUCTION BRABENDER COX LLC Mailing Address 1218 GRANDVIEW AVENUE City State Zip Code **PITTSBURGH** 15211 PA Transaction ID: SD10.60101 Outstanding Balance Beginning This Period 3250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 3250.00 0.00 26500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

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46 OF

NAME OF COMMITTEE (In Full) PATRIOT VOICES PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): EMAIL COMM, DATABASE, CONTRIB CMDI **PROCESSING** Mailing Address 1593 SPRING HILL ROAD SUITE 400 State Zip Code TYSONS CORNER 22182 Transaction ID: SD10.60102 Outstanding Balance Beginning This Period 2930.78 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2930.78 250.74 250.74 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **DIRECT MAIL HSP DIRECT** Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300 City State Zip Code **ASHBURN** 20147 VA Outstanding Balance Beginning This Period Transaction ID: SD10.60103 4011.74 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3549.15 462.59 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LIST EXPENSE SUNRISE DATA SERVICES Mailing Address 44845 FALCON PLACE SUITE 101A City State Zip Code **DULLES** 20166 VA Transaction ID: SD10.60104 Outstanding Balance Beginning This Period 3490.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4319.45 829.45 8119.34 1) SUBTOTALS This Period This Page (optional)..... 34619.34 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 34619.34 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶