

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Family For Good Government Federal PAC

Report Covering the Period: From: ^M0 ^M7 / ^D0 ^D1 / ^Y2 ^Y0 ^Y1 ^Y5 To: ^M1 ^M2 / ^D3 ^D1 / ^Y2 ^Y0 ^Y1 ^Y5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^Y 2 ^Y 0 ^Y 1 ^Y 5	2 0 1 5	2 5 5 2 0 8 5
(b) Cash on Hand at Beginning of Reporting Period.....	2 3 8 7 7 9 0	
(c) Total Receipts (from Line 19).....	0 0 0	0 0 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2 3 8 7 7 9 0	2 5 5 2 0 8 5
7. Total Disbursements (from Line 31).....	3 6 5 5	1 6 7 9 5 0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2 3 8 4 1 3 5	2 3 8 4 1 3 5
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0 0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0 0 0	

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)

Page 3

Write or Type Committee Name

Family For Good Government Federal PAC

Report Covering the Period: From: ^M0 ^M7 / ^D0 ^D1 / ^Y2 ^Y0 ^Y1 ^Y5 To: ^M1 ^M2 / ^D3 ^D1 / ^Y2 ^Y0 ^Y1 ^Y5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0 0 0	0 0 0
(ii) Unitemized.....	0 0 0	0 0 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0 0 0	0 0 0
(b) Political Party Committees.....	0 0 0	0 0 0
(c) Other Political Committees (such as PACs).....	0 0 0	0 0 0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	0 0 0	0 0 0
12. Transfers From Affiliated/Other Party Committees.....	0 0 0	0 0 0
13. All Loans Received.....	0 0 0	0 0 0
14. Loan Repayments Received.....	0 0 0	0 0 0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0 0 0	0 0 0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0 0 0	0 0 0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0 0 0	0 0 0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0 0 0	0 0 0
(b) Levin Funds (from Schedule H5).....	0 0 0	0 0 0
(c) Total Transfers (add 18(a) and 18(b))..	0 0 0	0 0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0 0 0	0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0 0 0	0 0 0

NON-FEDERAL AND LEVIN FUNDS

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 0 0	0 0 0
(ii) Non-Federal Share	0 0 0	0 0 0
(b) Other Federal Operating Expenditures	3 6 5 5	1 7 9 5 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3 6 5 5	1 7 9 5 0
22. Transfers to Affiliated/Other Party Committees	0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0 0 0	1 5 0 0 0 0
24. Independent Expenditures (use Schedule E)	0 0 0	0 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0 0 0	0 0 0
26. Loan Repayments Made	0 0 0	0 0 0
27. Loans Made	0 0 0	0 0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 0 0	0 0 0
(b) Political Party Committees	0 0 0	0 0 0
(c) Other Political Committees (such as PACs)	0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0 0	0 0 0
29. Other Disbursements	0 0 0	0 0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 0 0	0 0 0
(ii) "Levin" Share	0 0 0	0 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 0 0	0 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0 0 0	0 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3 6 5 5	1 6 7 9 5 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3 6 5 5	1 6 7 9 5 0

NON-FEDERAL SHARE

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0 0 0	0 0 0
34. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0 0 0	0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3 6 5 5	1 7 9 5 0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0 0 0	0 0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3 6 5 5	1 7 9 5 0

NON-FEDERAL CAMPAIGN CONTRIBUTIONS

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 6 OF 7
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)
Family For Good Government Federal PAC

A. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City State Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Disbursement M M / D D / Y Y Y Y _____ Amount of Each Disbursement this Period _____ Category/ Type
B. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City State Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Disbursement M M / D D / Y Y Y Y _____ Amount of Each Disbursement this Period _____ Category/ Type
C. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City State Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Disbursement M M / D D / Y Y Y Y _____ Amount of Each Disbursement this Period _____ Category/ Type

SUBTOTAL of Disbursements This Page (optional).....▶	_____
TOTAL This Period (last page this line number only).....▶	3 6 5 5

2014-01-10 10:00 AM

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 7 OF 7	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
Family For Good Government Federal PAC

Full Name (Last, First, Middle Initial) A. Kamala Harris for Senate		Date of Disbursement 09 / 21 / 2015
Mailing Address 777 S Figueroa Street, Suite 4050		Amount of Each Disbursement this Period 50000
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Contribution	0 1 1
Candidate Name Kamala D. Harris	C00571919	Category/ Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	
State: CA	District: 00	2016

Full Name (Last, First, Middle Initial) B. Mike Crapo for US Senate		Date of Disbursement 09 / 23 / 2015
Mailing Address P.O. Box 1948		Amount of Each Disbursement this Period 50000
City Boise	State ID	
Zip Code 83701	Purpose of Disbursement Contribution	0 1 1
Candidate Name Michael D. Crapo	C00330886	Category/ Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	
State: ID	District: 00	2016

Full Name (Last, First, Middle Initial) C. Tim Scott for Senate		Date of Disbursement 12 / 30 / 2015
Mailing Address 1405 Ashley River Road		Amount of Each Disbursement this Period - 1000000
City Charleston	State SC	
Zip Code 29407	Purpose of Disbursement Lost Check - Voided (Original date on check was 6/10/2015)	0 1 1
Candidate Name Timothy E. Scott	C00540302	Category/ Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	
State: SC	District: 00	2016

SUBTOTAL of Disbursements This Page (optional).....	
TOTAL This Period (last page this line number only).....	000

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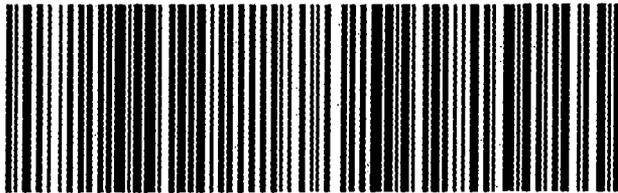
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