

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**CSRA Inc. PAC**

ADDRESS (number and street) **3170 Fairview Park Dr.**  
 Check if different than previously reported. (ACC) **Falls Church VA 22042**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00101410** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period   /   /    through   /   /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **Libby, Kevin, , Mr.,**

Signature of Treasurer **Libby, Kevin, , Mr.,** [Electronically Filed] Date   /   /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**CSRA Inc. PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		706893.37
(b) Cash on Hand at Beginning of Reporting Period.....	715028.38	
(c) Total Receipts (from Line 19) .....	7194.15	40445.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	722222.53	747339.02
7. Total Disbursements (from Line 31).....	6000.00	31116.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	716222.53	716222.53
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**CSRA Inc. PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6072.40	25841.87
(ii) Unitemized .....	1121.75	9603.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7194.15	35445.65
(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) .....	7194.15	35445.65
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7194.15	40445.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7194.15	40445.65

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	116.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	116.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	31000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6000.00	31116.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	31116.49

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7194.15	35445.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7194.15	35445.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	116.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	116.49

**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 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Binjrajka, Raashi, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Business Process Analysis Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : 25097517**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Haley, Michael, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9800 Savage Rd  
 City Fort Meade State MD Zip Code 20755-5999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) VP : Industry  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR1524615554346**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

**C. Kesseling, Debbie, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 S Hayes St  
 City Arlington State VA Zip Code 22202-5005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Prin : Program Management  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR1543209654346**  
 Amount of Each Receipt this Period  
 54.00  
 Memo Item  
 P/R Deduction (\$27.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Roberts, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 207 Hospital Dr  
 City Barbourville State KY Zip Code 40906-7356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Sr Mgr : Business Process Outsourcing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR156453354346**  
 Amount of Each Receipt this Period 52.00  
 Memo Item  
 P/R Deduction (\$26.00 Bi-Weekly)

**B. Khanna, Yogesh, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15000 Conference Center Dr  
 City Chantilly State VA Zip Code 20151-3819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Sr Prin : Chief Technology Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1564534954346**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

**C. Chaplin, Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3110 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Sr Prin : Solution Architect  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1582435454346**  
 Amount of Each Receipt this Period 52.00  
 Memo Item  
 P/R Deduction (\$26.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	154.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kociolek, Ryan, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 3160 Fairview Park Dr		<b>Transaction ID : PR1595661754346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) CSRA	Occupation (for Individual) Sr Prin : Business Developer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Oxenberg, Sheldon, C, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 7000 Lincoln Dr		<b>Transaction ID : PR1625692454346</b>
City Marlton	State NJ	Zip Code 08053-1542
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer (for Individual) CSRA	Occupation (for Individual) Advr : Software Engineer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Altieri, George, L, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 15000 Conference Center Dr		<b>Transaction ID : PR1752580854346</b>
City Chantilly	State VA	Zip Code 20151-3819
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer (for Individual) CSRA	Occupation (for Individual) Dir : Solutions	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Butler, Timothy, J, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 142 Hershaw Windham Dr			<b>Transaction ID : PR1752658054346</b>
City Daleville	State AL	Zip Code 36322	Amount of Each Receipt this Period 153.84
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) Dir : Account General Manager	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Clore, Kathleen, M, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 859 Buchanan St			<b>Transaction ID : PR1752691154346</b>
City Scott Afb	State IL	Zip Code 62225-5116	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) Prin : Program Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Connell, Kevin, K, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 6101 Stevenson Ave			<b>Transaction ID : PR1752697254346</b>
City Alexandria	State VA	Zip Code 22304-3540	Amount of Each Receipt this Period 230.76
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) Vice President	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1153.80		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	461.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Deyoung, Christine, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6361 Walker Lane  
 City Alexandria State VA Zip Code 22310-3275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Prin : Program Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1752732154346**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. Deutsch, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) VP : General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1752732354346**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. Elderkin, Helaine, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) VP : Legal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1692.35

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1752756554346**  
 Amount of Each Receipt this Period 307.70  
 Memo Item  
 P/R Deduction (\$153.85 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	461.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Jayasundera, Shalini, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church State VA Zip Code 22042-4516  
 Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1752896054346**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 P/R Deduction (\$30.00 Bi-Weekly)  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Dir : Program  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

**B. Petry, Jennifer, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 79 T W Alexander Dr  
 City Research Triangle Park State NC Zip Code 27709-0152  
 Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1753087154346**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Prin : Program Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

**C. Ritzinger, Laura, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6000 Lincoln Dr  
 City Marlton State NJ Zip Code 08053  
 Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1753126154346**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Prin : Solution Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Henry, Lawrence, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3110 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Sr Prin : Solution Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR1769844654346**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**B. Sullivan, Sally, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) VP : Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR2153912254346**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

**C. Libby, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) VP, Finance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 05 / 31 / 2017  
**Transaction ID : PR2157839054346**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Prior, Lawrence, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3170 Fairview Park Dr

City Falls Church	State VA	Zip Code 22042-4516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSRA	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2115.41

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR2157884354346**

Amount of Each Receipt this Period  
384.62

Memo Item

P/R Deduction (\$192.31 Bi-Weekly)

**B. Thrasher, Paula, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3170 Fairview Park Dr.

City Falls Church	State VA	Zip Code 22042-4516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSRA	Occupation (for Individual) Director, Digital Services
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR2264581454346**

Amount of Each Receipt this Period  
250.00

Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

**C. Holleran, Edward, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3170 Fairview Park Dr

City Falls Church	State VA	Zip Code 22042-4516
----------------------	-------------	------------------------

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

Name of Employer (for Individual) CSRA	Occupation (for Individual) Finance Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
211.53

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR2264604554346**

Amount of Each Receipt this Period  
38.46

Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	673.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Brunner, Kevin, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 530 Independence Parkway Suite 100		<b>Transaction ID : PR2413653454346</b>
City Chesapeake	State VA	Zip Code 23320-5203
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) CSRA	Occupation (for Individual) MSC AFLOAT TECH LEAD	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	P/R Deduction (\$125.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Engelhart, Michele, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr		<b>Transaction ID : PR2413655954346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) CSRA	Occupation (for Individual) VICE PRESIDENT	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$25.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gieseman, Ben, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr		<b>Transaction ID : PR2413656154346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer (for Individual) CSRA	Occupation (for Individual) VP, DIRECTOR OF PRICING	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$40.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hirsch, Donald, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr			<b>Transaction ID : PR2413656354346</b>
City Falls Church	State VA	Zip Code 22042-4516	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) VICE PRESIDENT	P/R Deduction (\$30.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Nedzbala, Paul, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr			<b>Transaction ID : PR2413656854346</b>
City Falls Church	State VA	Zip Code 22042-4516	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) VICE PRESIDENT	P/R Deduction (\$100.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Shartle, Frank, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr			<b>Transaction ID : PR2413657454346</b>
City Falls Church	State VA	Zip Code 22042-4516	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSRA		Occupation (for Individual) SR. PRINCIPAL	P/R Deduction (\$21.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	302.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Doxer, Ed, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr.		<b>Transaction ID : PR2416099054346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) CSRA	Occupation (for Individual) Director, Internal Audit	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$100.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Haynes, William, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr.		<b>Transaction ID : PR2416454654346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.62
Name of Employer (for Individual) CSRA	Occupation (for Individual) EVP, GC, and Secretary, Legal	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.41	P/R Deduction (\$192.31 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kolchins, Joshua, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2017
Mailing Address 3170 Fairview Park Dr.		<b>Transaction ID : PR2416883554346</b>
City Falls Church	State VA	Zip Code 22042-4516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer (for Individual) CSRA	Occupation (for Individual) Business Development Executive	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	738.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Marrone, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2416946054346**  
 Amount of Each Receipt this Period  
 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

**B. Keffer, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) EVP, CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2416946154346**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Semi-Monthly)

**C. Palmer, Sherron, Leigh, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church State VA Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1692.35

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2470295954346**  
 Amount of Each Receipt this Period  
 307.70  
 Memo Item  
 P/R Deduction (\$153.85 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	618.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Veitch, Alexandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church    State VA    Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA    Occupation (for Individual) VP Government Relations  
 Receipt For:  Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2506169654346**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**B. Anderson, John, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1170 Fairview Park Dr.  
 City Falls Church    State VA    Zip Code 22042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA    Occupation (for Individual) Vice President  
 Receipt For:  Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.35

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2506169854346**  
 Amount of Each Receipt this Period 333.34  
 Memo Item  
 P/R Deduction (\$166.67 Semi-Monthly)

**C. Powell Ix, Henry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Fairview Park Dr.  
 City Falls Church    State VA    Zip Code 22042-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRA    Occupation (for Individual) Sr. Program Manager  
 Receipt For:  Primary     General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : PR2507815154346**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	717.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

**A. Dussek, Gilbert, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3170 Fairview Park Dr.

City Falls Church	State VA	Zip Code 22042-4516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSRA	Occupation (for Individual) Director
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR2507816254346**

Amount of Each Receipt this Period  
166.66

Memo Item

P/R Deduction (\$83.33 Semi-Monthly)

**B. Gallagher, John, P, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8000 Lincoln Dr

City Marlton	State NJ	Zip Code 08053-1542
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CSRA	Occupation (for Individual) Dir : Shared Services
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR333796354346**

Amount of Each Receipt this Period  
40.00

Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

**C. Gianni, Ben, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 G St Nw  
3Rd Floor Suite 300

City Washington	State DC	Zip Code 20001-4545
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSRA	Occupation (for Individual) VP : Business
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : PR555270854346**

Amount of Each Receipt this Period  
80.00

Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	286.66
<b>TOTAL</b> This Period (last page this line number only).....	6072.40

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CSRA Inc. PAC**

Full Name (Last, First, Middle Initial) <b>A. John Kennedy For Us Senate Inc</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017
Mailing Address PO Box 365		FEC Identification Number C00396044 <b>Transaction ID : 75503393</b>
City Mclean	State VA	Zip Code 22101
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Kennedy, John, , Mr.,</b>		Category/Type 011
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: LA	District:	

Full Name (Last, First, Middle Initial) <b>B. Bill Cassidy For Us Senate</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017
Mailing Address PO Box 80505		FEC Identification Number C00543983 <b>Transaction ID : 75503400</b>
City Baton Rouge	State LA	Zip Code 70898
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Cassidy, Bill, , Sen.,</b>		Category/Type 011
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: LA	District:	

Full Name (Last, First, Middle Initial) <b>C. Scott Peters For Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017
Mailing Address PO Box 22074		FEC Identification Number C00503110 <b>Transaction ID : 75503445</b>
City San Diego	State CA	Zip Code 92192
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Peters, Scott, , Rep.,</b>		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 52	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00