

**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

Go Big Go Bold PAC, Inc.

ADDRESS (number and street) ▼

722 12th Street, N.W.

4th Floor

 Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00573147

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

 Primary (12P) General (12G) Runoff (12R)**PRE-Election**

Report for the:

 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

 / / 2016

through

 / / 2016

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 Robert Adams

Signature of Treasurer

Robert Adams

[Electronically Filed]

Date

 / / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Go Big Go Bold PAC, Inc.

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="2016"/>	<input type="text" value="5530.30"/>	<input type="text" value="5530.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5530.30"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="48352.74"/>	<input type="text" value="48352.74"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="53883.04"/>	<input type="text" value="53883.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33009.73"/>	<input type="text" value="33009.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20873.31"/>	<input type="text" value="20873.31"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Go Big Go Bold PAC, Inc.

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).....	16700.00	16700.00
(ii) Unitemized	31652.74	31652.74
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	48352.74	48352.74
(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)	48352.74	48352.74
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	48352.74	48352.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	48352.74	48352.74

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	11759.73	11759.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11759.73	11759.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	21000.00	21000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(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)).....	250.00	250.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33009.73	33009.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33009.73	33009.73

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)	48352.74	48352.74
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48102.74	48102.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11759.73	11759.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11759.73	11759.73

**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 6 OF 48
<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

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)
Go Big Go Bold PAC, Inc.

A. Patricia A. Ainley
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 3908
City Crestline State CA Zip Code 92325
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Ainley Enterprises, LLC property management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 21 / 2016
Transaction ID : SA11AI.5781
Amount of Each Receipt this Period
500.00
 Memo Item

B. Harold Beck
Full Name (Last, First, Middle Initial)
Mailing Address 6281 Meetinghouse Road
City New Hope State PA Zip Code 18938
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
n/a retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 21 / 2016
Transaction ID : SA11AI.5787
Amount of Each Receipt this Period
1000.00
 Memo Item

C. Klaus Beckmann
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 167
City Amsterdam State NY Zip Code 12010
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Beckmann Converting, Inc. owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 27 / 2016
Transaction ID : SA11AI.5416
Amount of Each Receipt this Period
250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Klaus Beckmann
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 167
 City Amsterdam State NY Zip Code 12010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beckmann Converting, Inc. Occupation owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : SA11AI.5495
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Klaus Beckmann
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 167
 City Amsterdam State NY Zip Code 12010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beckmann Converting, Inc. Occupation owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016
Transaction ID : SA11AI.5657
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Klaus Beckmann
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 167
 City Amsterdam State NY Zip Code 12010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beckmann Converting, Inc. Occupation owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016
Transaction ID : SA11AI.5670
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. Klaus Beckmann

Mailing Address P. O. Box 167

City Amsterdam State NY Zip Code 12010

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

Name of Employer Beckmann Converting, Inc. Occupation owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2016

Transaction ID : SA11AI.5608

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Shad Bolen

Mailing Address 1825 Ferney Creek Road, N.W.

City Willis State VA Zip Code 24380

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

Name of Employer Timberland Mulch Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.5400

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Shad Bolen

Mailing Address 1825 Ferney Creek Road, N.W.

City Willis State VA Zip Code 24380

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

Name of Employer Timberland Mulch Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.5508

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 9 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. M. Suzanne Branning

Mailing Address 616 King Ranch Road

City State Zip Code
Southlake TX 76092

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

Name of Employer Occupation
n/a homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2016
Transaction ID : SA11AI.5700

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Billy Buckner

Mailing Address 7180 Mountain View Drive, N.E.

City State Zip Code
Pinson AL 35126

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

Name of Employer Occupation
UAB Health Services Foundation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2016
Transaction ID : SA11AI.5574

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Samuel Bynum

Mailing Address 216 Lake Brant Drive

City State Zip Code
Lutz FL 33548

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

Name of Employer Occupation
TFS Holdings executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016
Transaction ID : SA11AI.5673

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 10 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Jeanette Dekay
 Full Name (Last, First, Middle Initial)
 Mailing Address 6201 Foothills Drive
 City Farmington State NM Zip Code 87402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mfp, Inc. Occupation c.f.o.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2016
Transaction ID : SA11AI.5470
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Jeanette Dekay
 Full Name (Last, First, Middle Initial)
 Mailing Address 6201 Foothills Drive
 City Farmington State NM Zip Code 87402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mfp, Inc. Occupation c.f.o.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2016
Transaction ID : SA11AI.5731
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Timothy Docter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7778 Boca Raton Drive
 City Las Vegas State NV Zip Code 89113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 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
 03 / 19 / 2016
Transaction ID : SA11AI.5711
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 11 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Andrew Fitzgerald
Full Name (Last, First, Middle Initial)

Mailing Address 37 Timberland Circle, S.

City Fort Myers State FL Zip Code 33919

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

Name of Employer Delisi Fitzgerald, Inc. Occupation civil engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 02 / 2016
Transaction ID : SA11AI.5559

Amount of Each Receipt this Period 250.00

Memo Item

B. John Guittard
Full Name (Last, First, Middle Initial)

Mailing Address 3536 Wentwood Drive

City Dallas State TX Zip Code 75225

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2016
Transaction ID : SA11AI.5682

Amount of Each Receipt this Period 250.00

Memo Item

c. John Guittard
Full Name (Last, First, Middle Initial)

Mailing Address 3536 Wentwood Drive

City Dallas State TX Zip Code 75225

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 21 / 2016
Transaction ID : SA11AI.5784

Amount of Each Receipt this Period 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 12 OF 48
	<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)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. Mitch Hanna

Mailing Address 22410 Egbert Hill Road

City Grass Valley State CA Zip Code 95949

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

Name of Employer Sutter Health Occupation c.e.o.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2016

Transaction ID : SA11AI.5719

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Richard Hayes

Mailing Address 819 W. Oak Street

City Denton State TX Zip Code 76201

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

Name of Employer Hayes, Berry, White & Vanzant Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.5797

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Charles W. Hess

Mailing Address 70 Kendall Drive

City Ringwood State NJ Zip Code 07456

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

Name of Employer CB&I Federal Services Occupation engineer

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
 03 / 03 / 2016

Transaction ID : SA11AI.5568

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 48
(check only one)

<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)
Go Big Go Bold PAC, Inc.

A. Charles W. Hess
Full Name (Last, First, Middle Initial)
Mailing Address 70 Kendall Drive
City Ringwood State NJ Zip Code 07456
FEC ID number of contributing federal political committee. **C**
Name of Employer CB&I Federal Services Occupation engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 12 / 2016
Transaction ID : SA11AI.5613
Amount of Each Receipt this Period 100.00
 Memo Item

B. Charles W. Hess
Full Name (Last, First, Middle Initial)
Mailing Address 70 Kendall Drive
City Ringwood State NJ Zip Code 07456
FEC ID number of contributing federal political committee. **C**
Name of Employer CB&I Federal Services Occupation engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 14 / 2016
Transaction ID : SA11AI.5681
Amount of Each Receipt this Period 100.00
 Memo Item

C. Charles W. Hess
Full Name (Last, First, Middle Initial)
Mailing Address 70 Kendall Drive
City Ringwood State NJ Zip Code 07456
FEC ID number of contributing federal political committee. **C**
Name of Employer CB&I Federal Services Occupation engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 16 / 2016
Transaction ID : SA11AI.5695
Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 48
(check only one)

<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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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)
Go Big Go Bold PAC, Inc.

A. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 04 / 2016
Transaction ID : SA11AI.5434
Amount of Each Receipt this Period 500.00
 Memo Item

B. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 14 / 2016
Transaction ID : SA11AI.5458
Amount of Each Receipt this Period 250.00
 Memo Item

C. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00

Date of Receipt 02 / 18 / 2016
Transaction ID : SA11AI.5476
Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2016
Transaction ID : SA11AI.5487
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2016
Transaction ID : SA11AI.5497
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 29 / 2016
Transaction ID : SA11AI.5507
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 48
(check only one)

<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)
Go Big Go Bold PAC, Inc.

A. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 03 / 02 / 2016
Transaction ID : SA11AI.5564
Amount of Each Receipt this Period 250.00
 Memo Item

B. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 03 / 05 / 2016
Transaction ID : SA11AI.5585
Amount of Each Receipt this Period 250.00
 Memo Item

C. Donna J. Hetland
Full Name (Last, First, Middle Initial)
Mailing Address 122 April Breeze Street
City Montgomery State TX Zip Code 77356
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 03 / 05 / 2016
Transaction ID : SA11AI.5594
Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 17 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3050.00

Date of Receipt
 03 / 07 / 2016
Transaction ID : SA11AI.5658
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3300.00

Date of Receipt
 03 / 08 / 2016
Transaction ID : SA11AI.5651
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Donna J. Hetland
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3550.00

Date of Receipt
 03 / 19 / 2016
Transaction ID : SA11AI.5714
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 18 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. Donna J. Hetland
 Mailing Address 122 April Breeze Street
 City State Zip Code
 Montgomery TX 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2016
Transaction ID : SA11AI.5811
 Amount of Each Receipt this Period
 200.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. Constance Hilman
 Mailing Address 518 Lincoln Drive
 City State Zip Code
 Ventura CA 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Constant Communications Corp. concert production consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2016
Transaction ID : SA11AI.5592
 Amount of Each Receipt this Period
 250.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Phillip Howard
 Mailing Address 1713 Cottonwood Valley Circle, S.
 City State Zip Code
 Irving TX 75038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Meridian Business Centers real estate executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2016
Transaction ID : SA11AI.5696
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 19 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. Russell Lawrence

Mailing Address 4275 Owens Road, #531

City Evans State GA Zip Code 30809

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 03 / 21 / 2016
Transaction ID : SA11AI.5782

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Debbie Marush

Mailing Address 1570 Bay Blvd.

City Atlantic Beach State NY Zip Code 11509

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 03 / 01 / 2016
Transaction ID : SA11AI.5553

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Barry Quart

Mailing Address 1350 E. Flamingo Road, #349

City Las Vegas State NV Zip Code 89119

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

Name of Employer Heron Therapeutics Occupation research

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 03 / 11 / 2016
Transaction ID : SA11AI.5623

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 20 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Barry Quart
Full Name (Last, First, Middle Initial)

Mailing Address 1350 E. Flamingo Road, #349

City Las Vegas	State NV	Zip Code 89119
-------------------	-------------	-------------------

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

Name of Employer Heron Therapeutics	Occupation research
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2016
Transaction ID : SA11AI.5802

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Ed Sebesta
Full Name (Last, First, Middle Initial)

Mailing Address 1468 Sugar Creek Blvd.

City Sugar Land	State TX	Zip Code 77478
--------------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : SA11AI.5691

Amount of Each Receipt this Period
 250.00

Memo Item

C. Gerritt Smith
Full Name (Last, First, Middle Initial)

Mailing Address 50 White Tail Lane

City Lafayette	State IN	Zip Code 47905
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FEC ID number of contributing federal political committee. **C**

Name of Employer Unity Healthcare	Occupation physician
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2016
Transaction ID : SA11AI.5790

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 21 OF 48
	<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)
Go Big Go Bold PAC, Inc.

A. David Spencer
Full Name (Last, First, Middle Initial)

Mailing Address 3832 Montana Verde Road

City Santa Fe State NM Zip Code 87507

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

Name of Employer All States Equipment Occupation sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016
Transaction ID : SA11AI.5411

Amount of Each Receipt this Period
 250.00

Memo Item

B. Larry Wedekind
Full Name (Last, First, Middle Initial)

Mailing Address 19207 Clear Sky Drive

City Kingwood State TX Zip Code 77346

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

Name of Employer Integra Net Health Occupation healthcare administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016
Transaction ID : SA11AI.5684

Amount of Each Receipt this Period
 250.00

Memo Item

C. Anthony Werderitsch
Full Name (Last, First, Middle Initial)

Mailing Address 6371 Saline Ann Arbor Road

City Saline State MI Zip Code 48176

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

Name of Employer Administrative Controls Mgmt Occupation engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016
Transaction ID : SA11AI.5490

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 48
(check only one)

<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)
Go Big Go Bold PAC, Inc.

A. Full Name (Last, First, Middle Initial)
John Wisenbaker

Mailing Address P. O. Box 14689

City Humble State TX Zip Code 77347

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

Name of Employer Wisenbaker builder service Occupation construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 07 / 2016
Transaction ID : SA11AI.5671

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	16700.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. BB&T Visa

Mailing Address P. O. Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement see memo entries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.5510

Amount of Each Disbursement this Period

697.33

Memo Item

Full Name (Last, First, Middle Initial)

B. Expedia.com

Mailing Address 333 108th Avenue, N.E.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : SB21B.5510.2

Amount of Each Disbursement this Period

202.27

Memo Item

Full Name (Last, First, Middle Initial)

C. Expedia.com

Mailing Address 333 108th Avenue, N.E.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2016

Transaction ID : SB21B.5510.4

Amount of Each Disbursement this Period

70.74

Memo Item

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

697.33

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. BB&T Visa

Mailing Address P. O. Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement see memo entries

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 21 / 2016

Transaction ID : **SB21B.5734**

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Longacre Bed & Breakfast

Mailing Address 1670 Church Street

City Appomattox State VA Zip Code 24522

Purpose of Disbursement lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2016

Transaction ID : **SB21B.5734.8**

Amount of Each Disbursement this Period: 276.05

Memo Item

Full Name (Last, First, Middle Initial)

C. GOP Swag, LLC

Mailing Address 842 Club Drive

City Palm Beach Gardens State FL Zip Code 33418

Purpose of Disbursement hats/shirts:non-candidate

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2016

Transaction ID : **SB21B.5544**

Amount of Each Disbursement this Period: 407.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1407.55

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : SB21B.5444

Amount of Each Disbursement this Period

150.59

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.5460

Amount of Each Disbursement this Period

37.06

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.5461

Amount of Each Disbursement this Period

14.46

Memo Item

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

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

202.11

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5462

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5463

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5464

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5465

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5466

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5467

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5468

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5469

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5540

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.5541

Amount of Each Disbursement this Period

32.47

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.5538

Amount of Each Disbursement this Period

15.04

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.5539

Amount of Each Disbursement this Period

105.98

Memo Item

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

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

153.49

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)
A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 22 / 2016

Transaction ID : **SB21B.5535**

Amount of Each Disbursement this Period: 10.21

Memo Item

Full Name (Last, First, Middle Initial)
B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 24 / 2016

Transaction ID : **SB21B.5536**

Amount of Each Disbursement this Period: 8.81

Memo Item

Full Name (Last, First, Middle Initial)
C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 25 / 2016

Transaction ID : **SB21B.5534**

Amount of Each Disbursement this Period: 45.83

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 64.85

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2016

Transaction ID : **SB21B.5537**

Amount of Each Disbursement this Period

21.17

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : **SB21B.5533**

Amount of Each Disbursement this Period

2.28

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : **SB21B.5532**

Amount of Each Disbursement this Period

46.19

Memo Item

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

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

69.64

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2016

Transaction ID : SB21B.5548

Amount of Each Disbursement this Period

5.74

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.5549

Amount of Each Disbursement this Period

68.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.5550

Amount of Each Disbursement this Period

109.28

Memo Item

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

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

183.16

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : SB21B.5551

Amount of Each Disbursement this Period

127.56

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : SB21B.5552

Amount of Each Disbursement this Period

67.37

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2016

Transaction ID : SB21B.5603

Amount of Each Disbursement this Period

86.78

Memo Item

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

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

281.71

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : SB21B.5601

Amount of Each Disbursement this Period

362.39

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2016

Transaction ID : SB21B.5602

Amount of Each Disbursement this Period

112.07

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
service charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : SB21B.5606

Amount of Each Disbursement this Period

29.00

Memo Item

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

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

503.46

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : **SB21B.5604**

Amount of Each Disbursement this Period

261.02

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.5677**

Amount of Each Disbursement this Period

85.36

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.5680**

Amount of Each Disbursement this Period

53.31

Memo Item

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

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

399.69

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : SB21B.5678

Amount of Each Disbursement this Period

95.42

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : SB21B.5679

Amount of Each Disbursement this Period

285.40

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SB21B.5736

Amount of Each Disbursement this Period

264.79

Memo Item

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

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

645.61

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5755

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5855

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5806

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : SB21B.5807

Amount of Each Disbursement this Period

64.88

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : SB21B.5808

Amount of Each Disbursement this Period

99.52

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : SB21B.5809

Amount of Each Disbursement this Period

51.23

Memo Item

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

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

215.63

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : SB21B.5810

Amount of Each Disbursement this Period

350.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 649 Mission Street, #204

City San Francisco State CA Zip Code 94105

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : SB21B.5845

Amount of Each Disbursement this Period

45.89

Memo Item

Full Name (Last, First, Middle Initial)

C. Revive America, LLC

Mailing Address 415 Paso Corto Drive

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
fundraising/non-candidate

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.5737

Amount of Each Disbursement this Period

4000.00

Memo Item

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

4396.42

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Go Big Go Bold PAC, Inc.

A. Revive America, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 415 Paso Corto Drive

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement fundraising/non-candidate

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2016

Transaction ID : SB21B.5738

Amount of Each Disbursement this Period: 1500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	11316.59

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Go Big Go Bold PAC, Inc.

Full Name (Last, First, Middle Initial)

A. David Spencer

Mailing Address 3832 Montana Verde Road

City Santa Fe State NM Zip Code 87507

Purpose of Disbursement
contribution refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2016

Transaction ID : SB28A.5607

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

250.00

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

250.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00573147 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee Revive America, LLC	<input type="checkbox"/> Memo Item
Mailing Address 415 Paso Corto Drive	
City Kearneysville	State WV
Zip Code 25430	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 01 / 2016
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Amount 3000.00	Transaction ID : SE.5741 Date of Disbursement or Obligation MM / DD / YYYY 02 / 01 / 2016

Full Name of Payee Revive America, LLC	<input type="checkbox"/> Memo Item
Mailing Address 415 Paso Corto Drive	
City Kearneysville	State WV
Zip Code 25430	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 23 / 2016
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Amount 1500.00	Transaction ID : SE.5742 Date of Disbursement or Obligation MM / DD / YYYY 02 / 24 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams

 Signature

[Electronically Filed] Date MM / DD / YYYY
 04 / 14 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573147 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Revive America, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">03 / 08 / 2016</div>						
Mailing Address 415 Paso Corto Drive	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">1000.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Kearneysville</td> <td>WV</td> <td>25430</td> </tr> </table>	City	State	Zip Code	Kearneysville	WV	25430	Transaction ID : SE.5743 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">03 / 07 / 2016</div>
City	State	Zip Code					
Kearneysville	WV	25430					
Purpose of Expenditure voter contact-emails Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px; height: 15px;"></div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rafael Edward 'Ted' Cruz						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">1000.00</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Revive America, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">03 / 08 / 2016</div>						
Mailing Address 415 Paso Corto Drive	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">1000.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Kearneysville</td> <td>WV</td> <td>25430</td> </tr> </table>	City	State	Zip Code	Kearneysville	WV	25430	Transaction ID : SE.5744 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">03 / 07 / 2016</div>
City	State	Zip Code					
Kearneysville	WV	25430					
Purpose of Expenditure voter contact-emails Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px; height: 15px;"></div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rafael Edward 'Ted' Cruz						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">1000.00</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MS</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">2000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams
[Electronically Filed]
Date

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

04 / 14 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00573147
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1000.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> ID </u>
Calendar Year-To-Date Per Election for Office Sought 1000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1000.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> HI </u>
Calendar Year-To-Date Per Election for Office Sought 1000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00573147
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1500.00	1500.00

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1500.00	1500.00

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y 04 / 14 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00573147
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1500.00	1500.00

Transaction ID : SE.5752

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1500.00	1500.00

Transaction ID : SE.5753

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00573147
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 415 Paso Corto Drive	Amount 1500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1500.00	

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 22 / 2016
Mailing Address 415 Paso Corto Drive	Amount 2500.00
City State Zip Code Kearneysville WV 25430	
Purpose of Expenditure voter contact-emails	Category/Type
Name of Federal Candidate Rafael Edward 'Ted' Cruz	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 21 / 2016
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
2500.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Go Big Go Bold PAC, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00573147
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Revive America, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 22 / 2016
Mailing Address 415 Paso Corto Drive	Amount 2500.00
City State Zip Code Kearneysville WV 25430	Transaction ID : SE.5749 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 21 / 2016
Purpose of Expenditure voter contact-emails Category/Type 	Name of Federal Candidate Rafael Edward 'Ted' Cruz <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought 2500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	21000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Adams [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Signature _____