

# 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  
Prosperity Action Inc.

ADDRESS (number and street) 1006 Pendleton Street  
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00377689 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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 Paul Kilgore

Signature of Treasurer Paul Kilgore [Electronically Filed] Date 07 / 31 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Prosperity Action 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="2015"/>		331971.84
(b) Cash on Hand at Beginning of Reporting Period.....	331971.84	
(c) Total Receipts (from Line 19) .....	564188.39	564188.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	896160.23	896160.23
7. Total Disbursements (from Line 31).....	703014.56	703014.56
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	193145.67	193145.67
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Prosperity Action 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).....	177899.50	177899.50
(ii) Unitemized .....	106170.20	106170.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	284069.70	284069.70
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	178830.66	178830.66
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	462900.36	462900.36
12. Transfers From Affiliated/Other Party Committees.....	101223.24	101223.24
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.).....	64.79	64.79
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))..... ▶	564188.39	564188.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	564188.39	564188.39

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	418609.20	418609.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	418609.20	418609.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	282980.36	282980.36
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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 .....	425.00	425.00
(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)).....	425.00	425.00
29. Other Disbursements .....	1000.00	1000.00
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)) ..	703014.56	703014.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	703014.56	703014.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	462900.36	462900.36
34. Total Contribution Refunds (from Line 28(d)) .....	425.00	425.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	462475.36	462475.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	418609.20	418609.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	418609.20	418609.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Prosperity Action Inc.**

**A. MARY ANN ACAMPORA**  
Full Name (Last, First, Middle Initial)

Mailing Address 404 THAYER POND RD.

City WILTON State CT Zip Code 06897-2406

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2015

**Transaction ID : SA11.96745**

Amount of Each Receipt this Period  
-50.00

CONTRIBUTION

CHARGED BACK

**B. MR. FRANK A. ALLSEITS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1805 CLOVER DR

City PALATINE State IL Zip Code 60067-4639

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

Name of Employer NONE Occupation RETIRED

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  
 02 / 27 / 2015

**Transaction ID : SA11.96536**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. JIM ALTAMIRANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 3970 ELLENITA AVE

City TARZANA State CA Zip Code 91356-5414

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

Name of Employer GAS COMPANY Occupation FIELD COLLECTOR

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 / 03 / 2015

**Transaction ID : SA11.95695**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. CAROL ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 STRONG RD  
 City VICTOR State NY Zip Code 14564-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 17 / 2015  
**Transaction ID : SA11.95927**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. DANA ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 FALL CREEK RD  
 City LAWRENCE State KS Zip Code 66049-9067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MACERICH Occupation REAL ESTATE INVESTMENT TRUST  
 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 / 09 / 2015  
**Transaction ID : SA11.96661**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. MR. RICHARD D. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 732 CHEVIOT CT.  
 City APOPKA State FL Zip Code 32712-4747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2015  
**Transaction ID : SA11.96741**  
 Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MRS. JEAN DOROTHY ASHLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1330 UNIVERSITY DR APT 22  
 City State Zip Code  
 MENLO PARK CA 94025-4241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC  
 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 / 24 / 2015  
**Transaction ID : SA11.96456**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. THOMAS P. ATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 EDGECLIFF PL APT 1061  
 City State Zip Code  
 CINCINNATI OH 45206-2898  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 13 / 2015  
**Transaction ID : SA11.96060**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. ROBERT BALOGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 TAHITI BEACH ISLAND RD  
 City State Zip Code  
 CORAL GABLES FL 33143-6551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THE BALOGH CO. EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : SA11.98769**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7750.00  
**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 9 OF 209
	<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)  
**Prosperity Action Inc.**

**A. JOHN BECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 4107 W. RUDELLA ROAD

City MEQUON State WI Zip Code 53092-2780

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.97389**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**B. JOHN BECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 4107 W. RUDELLA ROAD

City MEQUON State WI Zip Code 53092-2780

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97903**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C. JOHN BECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 4107 W. RUDELLA ROAD

City MEQUON State WI Zip Code 53092-2780

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98390**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. JOHN BECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4107 W. RUDELLA ROAD  
 City MEQUON State WI Zip Code 53092-2780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98683**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MRS. SUZANNE S. BECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 339 SPRINGVALE RD  
 City GREAT FALLS State VA Zip Code 22066-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96542**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. MARC BERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 180 E PEARSON #5604  
 City CHICAGO State IL Zip Code 60611-2185  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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 / 2015  
**Transaction ID : SA11.96802**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 11 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES BIDE**

Mailing Address **2 PINE LANE E**

City **BOYNTON BEACH**      State **FL**      Zip Code **33436-5622**

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

Name of Employer      Occupation  
**INFORMATION REQUESTED PER BEST EFF**      **INFORMATION REQUESTED PER BEST EFF**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**06 / 03 / 2015**

**Transaction ID : SA11.98512**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JACK BLAIR**

Mailing Address **2330 DOGWOOD MEADOWS COVE**

City **GERMANTOWN**      State **TN**      Zip Code **38139-6709**

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

Name of Employer      Occupation  
**NONE**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1250.00**

Date of Receipt  
**02 / 18 / 2015**

**Transaction ID : SA11.95959**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JACK BLAIR**

Mailing Address **2330 DOGWOOD MEADOWS COVE**

City **GERMANTOWN**      State **TN**      Zip Code **38139-6709**

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

Name of Employer      Occupation  
**NONE**      **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1250.00**

Date of Receipt  
**03 / 25 / 2015**

**Transaction ID : SA11.97319**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**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 12 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. JACK BLAIR**

Mailing Address 2330 DOGWOOD MEADOWS COVE

City State Zip Code  
GERMANTOWN TN 38139-6709

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97959**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JACK BLAIR**

Mailing Address 2330 DOGWOOD MEADOWS COVE

City State Zip Code  
GERMANTOWN TN 38139-6709

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98392**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JACK BLAIR**

Mailing Address 2330 DOGWOOD MEADOWS COVE

City State Zip Code  
GERMANTOWN TN 38139-6709

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98673**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**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 13 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**Prosperity Action Inc.**

**A. MR. KIER BOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 BEARDS CREEK DR  
 City State Zip Code  
 DAVIDSONVILLE MD 21035-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NOT EMPLOYED NOT EMPLOYED  
 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 / 24 / 2015  
**Transaction ID : SA11.96350**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MR. KIER BOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 BEARDS CREEK DR  
 City State Zip Code  
 DAVIDSONVILLE MD 21035-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NOT EMPLOYED NOT EMPLOYED  
 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  
 04 / 06 / 2015  
**Transaction ID : SA11.97220**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. MR. KIER BOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 BEARDS CREEK DR  
 City State Zip Code  
 DAVIDSONVILLE MD 21035-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NOT EMPLOYED NOT EMPLOYED  
 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  
 06 / 05 / 2015  
**Transaction ID : SA11.98517**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MRS. ELIZABETH C. BRAMSEN**  
 Mailing Address 26 RIDGE ROAD  
 City State Zip Code  
 BARRINGTON IL 60010-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : SA11.97837**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JAMES BRAMSEN**  
 Mailing Address 26 RIDGE ROAD  
 City State Zip Code  
 BARRINGTON IL 60010-9681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SPRAYING SYSTEMS CO CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : SA11.97836**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT BREGER**  
 Mailing Address 3701 COUNTY HWY NN  
 City State Zip Code  
 WEST BEND WI 53095-8763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MILWAUKEE RADIOLOGISTS LTD. PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.97392**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 10250.00  
**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 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ROBERT BREGER**

Mailing Address 3701 COUNTY HWY NN

City State Zip Code  
WEST BEND WI 53095-8763

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

Name of Employer Occupation  
MILWAUKEE RADIOLOGISTS LTD. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97897**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERT BREGER**

Mailing Address 3701 COUNTY HWY NN

City State Zip Code  
WEST BEND WI 53095-8763

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

Name of Employer Occupation  
MILWAUKEE RADIOLOGISTS LTD. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98394**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT BREGER**

Mailing Address 3701 COUNTY HWY NN

City State Zip Code  
WEST BEND WI 53095-8763

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

Name of Employer Occupation  
MILWAUKEE RADIOLOGISTS LTD. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98663**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**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: PAGE 16 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ROSEMARY BRIGGS**  
 Mailing Address 4711 WATAUGA ROAD  
 City State Zip Code  
 DALLAS TX 75209-1923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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  
 05 / 05 / 2015  
**Transaction ID : SA11.98162**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DON BRUCKNER**  
 Mailing Address 911 WAGON TRAIN SE  
 City State Zip Code  
 ALBUQUERQUE NM 87123-4141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GUEBERT BRUCKNER P.C. ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.97409**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. THOMAS BRUDER**  
 Mailing Address 600 REED ROAD STE. 301  
 City State Zip Code  
 BROOMALL PA 19008-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015  
**Transaction ID : SA11.95947**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 17 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. THOMAS BRUDER**  
 Mailing Address 600 REED ROAD STE. 301  
 City BROOMALL State PA Zip Code 19008-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 03 / 25 / 2015  
**Transaction ID : SA11.97305**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. THOMAS BRUDER**  
 Mailing Address 600 REED ROAD STE. 301  
 City BROOMALL State PA Zip Code 19008-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 04 / 29 / 2015  
**Transaction ID : SA11.97953**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. STEPHEN C. BRUNER**  
 Mailing Address 1035 BERKSHIRE ST  
 City OAK PARK State IL Zip Code 60302-1369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96624**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. STEPHEN C. BRUNER**

Mailing Address 1035 BERKSHIRE ST

City State Zip Code  
OAK PARK IL 60302-1369

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2015  
**Transaction ID : SA11.97579**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KATHRYN BURKE**

Mailing Address 7710 N. MERRIE LANE

City State Zip Code  
MILWAUKEE WI 53217-2962

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2015  
**Transaction ID : SA11.98336**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. PETER H. BURLEIGH**

Mailing Address 3140 BOLGOS CIR

City State Zip Code  
ANN ARBOR MI 48105-1564

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015  
**Transaction ID : SA11.96347**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5350.00

**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 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. PETER H. BURLEIGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3140 BOLGOS CIR  
 City ANN ARBOR State MI Zip Code 48105-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2015  
**Transaction ID : SA11.97132**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MR. PETER H. BURLEIGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3140 BOLGOS CIR  
 City ANN ARBOR State MI Zip Code 48105-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : SA11.98094**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. LARRY R. BYRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13543 SPRUCEWOOD DR  
 City DALLAS State TX Zip Code 75240-3630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2015  
**Transaction ID : SA11.97718**  
 Amount of Each Receipt this Period 400.00  
 CONTRIBUTION

**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 20 OF 209  
(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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MERTICA CABRERA-MORRIS**

Mailing Address 2117 FOREST CLUB DR.

City State Zip Code  
ORLANDO FL 32804-6507

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

Name of Employer Occupation  
SELF EMPLOYED BUSINESS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2015

Transaction ID : SA11.96740

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. SUE M. CANNON**

Mailing Address 6420 W LAKERIDE RD

City State Zip Code  
DENVER CO 80227-3909

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2015

Transaction ID : SA11.98210

Amount of Each Receipt this Period  
750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DON CARTER**

Mailing Address 4757 FRANK LUKE DR

City State Zip Code  
ADDISON TX 75001-3202

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2015

Transaction ID : SA11.98560

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4250.00

**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 21 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. KIRSTEN CHADWICK**  
 Mailing Address 601 PRESIDENT FORD LANE  
 City State Zip Code  
 ALEXANDRIA VA 22302-3033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FIERCE GOVERNMENT RELATIONS CONSULTANT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2015  
**Transaction ID : SA11.97378**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT E. CHAPPELL**  
 Mailing Address 198 BLACKSMITH RD  
 City State Zip Code  
 OLEY PA 19547-8819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2015  
**Transaction ID : SA11.97281**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MS. ELLOINE M. CLARK**  
 Mailing Address 3716 MAPLEWOOD AVE.  
 City State Zip Code  
 DALLAS TX 75205-2827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2015  
**Transaction ID : SA11.97201**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00  
**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 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. STEPHEN B. CLARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 9273 LERWICK DR.

City DUBLIN	State OH	Zip Code 43017-9492
----------------	-------------	------------------------

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

Name of Employer CGCN GROUP	Occupation PARTNER
--------------------------------	-----------------------

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	/	2015

**Transaction ID : SA11.96898**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. THOMAS COAKLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 45 N. SPRINGER RD.

City LOS ALTOS	State CA	Zip Code 94024-3143
-------------------	-------------	------------------------

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

Name of Employer NONE	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
01	/	26	/	2015

**Transaction ID : SA11.95824**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**C. THOMAS COAKLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 45 N. SPRINGER RD.

City LOS ALTOS	State CA	Zip Code 94024-3143
-------------------	-------------	------------------------

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

Name of Employer NONE	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
02	/	23	/	2015

**Transaction ID : SA11.96081**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. THOMAS COAKLEY**

Mailing Address 45 N. SPRINGER RD.

City State Zip Code  
LOS ALTOS CA 94024-3143

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 25 / 2015  
**Transaction ID : SA11.97311**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. THOMAS COAKLEY**

Mailing Address 45 N. SPRINGER RD.

City State Zip Code  
LOS ALTOS CA 94024-3143

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97964**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. THOMAS COAKLEY**

Mailing Address 45 N. SPRINGER RD.

City State Zip Code  
LOS ALTOS CA 94024-3143

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98396**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 24 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. DENNIS J. CONROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 CHRISTIE PLACE #201E  
 City SCARSDALE State NY Zip Code 10583-8306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 04 / 02 / 2015  
**Transaction ID : SA11.97466**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. PAUL CORRIGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26980 CRESTWOOD DR  
 City FRANKLIN State MI Zip Code 48025-1378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORRIGAN MOVING SYSTEM Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015  
**Transaction ID : SA11.96611**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. JOSEPHINE COYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 ROUND TOP RD  
 City WARREN State NJ Zip Code 07059-5521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MINERALS TECHNOLOGIES INC Occupation VP METAL CASTING DIVISION  
 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96517**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 25 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. GERARD D'SOUZA**

Mailing Address 1610 HUNTERS GLEN CT

City State Zip Code  
WHEATON IL 60189-7464

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

Name of Employer Occupation  
NONE 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 / 19 / 2015  
**Transaction ID : SA11.96858**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. GERARD D'SOUZA**

Mailing Address 1610 HUNTERS GLEN CT

City State Zip Code  
WHEATON IL 60189-7464

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

Name of Employer Occupation  
NONE 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 / 31 / 2015  
**Transaction ID : SA11.97429**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GERARD D'SOUZA**

Mailing Address 1610 HUNTERS GLEN CT

City State Zip Code  
WHEATON IL 60189-7464

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

Name of Employer Occupation  
NONE 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  
 04 / 30 / 2015  
**Transaction ID : SA11.97991**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 26 OF 209
	<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

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)  
**Prosperity Action Inc.**

**A. MR. MAYNARD A. DARROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 130  
 City LAGRANGEVILLE State NY Zip Code 12540-0130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DARLIND CONSTRUCTION Occupation GENERAL CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2015  
**Transaction ID : SA11.96664**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. MR. MICHAEL DAVIDOWSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 BROADLAWN DR  
 City CENTRAL ISLIP State NY Zip Code 11722-4616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DNB BANK ASA Occupation FINANCIAL ANALYSIS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2015  
**Transaction ID : SA11.96729**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. FRANCES DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4700 WILTON PL  
 City ALEXANDRIA State LA Zip Code 71303-3771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 10 / 2015  
**Transaction ID : SA11.98526**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 27 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. NATHANIEL B. DAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 HILLSIDE DR.

City GREENWICH State CT Zip Code 06830-4751

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 10 / 2015  
Transaction ID : SA11.98525

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. JEFFREY J. DIERMEIER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2113 CANNA WAY

City NAPLES State FL Zip Code 34105-3069

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 24 / 2015  
Transaction ID : SA11.96452

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. MARY DORAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 579 SOUTHERN OAK CIR.

City HARTLAND State WI Zip Code 53029-8005

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 30 / 2015  
Transaction ID : SA11.98010

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**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 28 OF 209  
(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)  
**Prosperity Action Inc.**

**A. MR. NIKITAS DRAKOTOS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5441 PALISADE AVE.  
City BRONX State NY Zip Code 10471-1200  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2015  
**Transaction ID : SA11.97227**  
Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**B. MR. NIKITAS DRAKOTOS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5441 PALISADE AVE.  
City BRONX State NY Zip Code 10471-1200  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2015  
**Transaction ID : SA11.97684**  
Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**C. DR. CRANT DUNCAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1822 BEVERLY GLEN DRIVE  
City SANTA ANA State CA Zip Code 92705-3157  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
NONE RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 27 / 2015  
**Transaction ID : SA11.96482**  
Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 29 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. DR. CRANT DUNCAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1822 BEVERLY GLEN DRIVE

City SANTA ANA	State CA	Zip Code 92705-3157
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

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
04		06		2015

**Transaction ID : SA11.97206**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**B. DR. CRANT DUNCAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1822 BEVERLY GLEN DRIVE

City SANTA ANA	State CA	Zip Code 92705-3157
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

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
04		29		2015

**Transaction ID : SA11.97827**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**C. WALTER EDWARDS**  
Full Name (Last, First, Middle Initial)  
Mailing Address N1533 MEADOW PARK DR.

City GREENVILLE	State WI	Zip Code 54942-8755
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2015

**Transaction ID : SA11.98064**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

REFUNDED \$25.00 ON 04/30/2015

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. NANCY EINHORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8205 N RIVER RD  
 City MILWAUKEE State WI Zip Code 53217-2546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2015  
**Transaction ID : SA11.96502**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. MR. ERNEST ELLISON II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6720 CHURCHILL PARK CT  
 City CHARLOTTE State NC Zip Code 28210-3480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2015  
**Transaction ID : SA11.96223**  
 Amount of Each Receipt this Period  
 400.00  
 CONTRIBUTION

**C. DENISE ESPOSITO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1945 TAYLORS GAP RD  
 City NORTH GARDEN State VA Zip Code 22959-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2015  
**Transaction ID : SA11.96663**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Prosperity Action Inc.**

**A. STEVEN ESRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 756 HARBOUR ISLES COURT  
 City NORTH PALM BEACH State FL Zip Code 33410-4416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2015  
**Transaction ID : SA11.98772**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

**B. ROSS S. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 588 FERN STREET  
 City WEST HARTFORD State CT Zip Code 06107-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 28 / 2015  
**Transaction ID : SA11.97793**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. JONATHAN FAIRBANKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3391 SLEEPY HOLLOW CT  
 City HOUSTON State TX Zip Code 77019-3125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GEC ADVISORS, LLC Occupation PRIVATE EQUITY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2015  
**Transaction ID : SA11.98723**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 32 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. STEVE FALK**  
 Mailing Address **8 BACKRIVER ROAD**  
 City State Zip Code  
**HINGHAM MA 02043-1574**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**RESOLUTE MANAGEMENT FINANCE**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**02 / 21 / 2015**  
**Transaction ID : SA11.96071**  
 Amount of Each Receipt this Period  
**250.00**  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. PHILIP FANNING**  
 Mailing Address **P.O. BOX 607**  
 City State Zip Code  
**UNIONVILLE PA 19375-0607**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**NONE RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**02 / 24 / 2015**  
**Transaction ID : SA11.96448**  
 Amount of Each Receipt this Period  
**500.00**  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. PHILIP FANNING**  
 Mailing Address **P.O. BOX 607**  
 City State Zip Code  
**UNIONVILLE PA 19375-0607**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
**NONE RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**03 / 19 / 2015**  
**Transaction ID : SA11.96837**  
 Amount of Each Receipt this Period  
**500.00**  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ► **1250.00**  
**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 33 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. PHILIP FANNING**  
 Mailing Address P.O. BOX 607  
 City State Zip Code  
 UNIONVILLE PA 19375-0607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2015  
**Transaction ID : SA11.97752**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS C. FEENEY**  
 Mailing Address 3994 CARNABY DR.  
 City State Zip Code  
 OVIEDO FL 32765-5114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ASSOCIATED INDUSTRIES OF FL PRESIDENT  
 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 / 2015  
**Transaction ID : SA11.96899**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ALLAN FERRIN**  
 Mailing Address 6015 CRYSTAL SPRINGS DR NE  
 City State Zip Code  
 BAINBRIDGE ISLAND WA 98110-2089  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF  
 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 / 26 / 2015  
**Transaction ID : SA11.97144**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 1250.00  
**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 34 OF 209
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	<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)  
**Prosperity Action Inc.**

**A. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

**Transaction ID : SA11.96563**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**B. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

**Transaction ID : SA11.96878**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : SA11.97403**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2015  
**Transaction ID : SA11.97673**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**B. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97925**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. DANIEL FINNANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 46700 AMETHYST DR

City INDIAN WELLS	State CA	Zip Code 92210-
----------------------	-------------	--------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98832**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

REFUNDED \$250.00 ON 06/17/2015

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**01 / 21 / 2015**

**Transaction ID : SA11.95806**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**02 / 17 / 2015**

**Transaction ID : SA11.95941**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**03 / 11 / 2015**

**Transaction ID : SA11.96784**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

**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 37 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**03 / 25 / 2015**  
**Transaction ID : SA11.97318**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**04 / 29 / 2015**  
**Transaction ID : SA11.97960**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. KELLI FISH**

Mailing Address **275 OAKLEY ROAD**

City **MOUNTAIN HOME**      State **AR**      Zip Code **72653-9147**

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

Name of Employer **NONE**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt  
**05 / 26 / 2015**  
**Transaction ID : SA11.98401**

Amount of Each Receipt this Period  
**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

**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 38 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. KELLI FISH**  
 Mailing Address 275 OAKLEY ROAD  
 City MOUNTAIN HOME State AR Zip Code 72653-9147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 26 / 2015  
**Transaction ID : SA11.98675**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID FLORY**  
 Mailing Address 1410 N. MEADE ST.  
 City ARLINGTON State VA Zip Code 22209-3703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 14 / 2015  
**Transaction ID : SA11.97618**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MRS. MARY L. FLORY**  
 Mailing Address 156 LOWER CREEK RD  
 City STOCKTON State NJ Zip Code 08559-1615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 27 / 2015  
**Transaction ID : SA11.96602**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5300.00  
**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 39 OF 209
	<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)  
**Prosperity Action Inc.**

**A. JOHN FOX**  
Full Name (Last, First, Middle Initial)

Mailing Address 2116 E 4TH AVE

City DENVER State CO Zip Code 80206-4106

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
02 / 26 / 2015  
Transaction ID : SA11.96464

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B. MICHAEL FRUGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 HENRIETTA DR

City CROWLEY State LA Zip Code 70526-2304

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 27 / 2015  
Transaction ID : SA11.96607

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. WARREN B. GALKIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 SAGE DR

City WARWICK State RI Zip Code 02886-6826

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

Name of Employer NATCO PRODUCTS INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
02 / 26 / 2015  
Transaction ID : SA11.96466

Amount of Each Receipt this Period  
3000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

**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 40 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. DAVID F. GENCARELLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 209 PENNSYLVANIA AVE. SE  
 City WASHINGTON State DC Zip Code 20003-1107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GENCARELLI GROUP Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2015  
**Transaction ID : SA11.96897**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. MR. PAUL GERWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3114 GOLFSIDE DR  
 City NAPLES State FL Zip Code 34110-7005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2015  
**Transaction ID : SA11.97145**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. DANIEL GOELZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5941 SEARL TER  
 City BETHESDA State MD Zip Code 20816-2022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BAKERS MCKENZIE Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2015  
**Transaction ID : SA11.96908**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**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 41 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. REBECCA GREEN**

Mailing Address 255 WEST 88TH ST #13B

City State Zip Code  
NEW YORK NY 10024-1719

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

Name of Employer Occupation  
MAACK ITALIA INTERIOR DESIGN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 15 / 2015  
**Transaction ID : SA11.95704**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. REBECCA GREEN**

Mailing Address 255 WEST 88TH ST #13B

City State Zip Code  
NEW YORK NY 10024-1719

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

Name of Employer Occupation  
MAACK ITALIA INTERIOR DESIGN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2015  
**Transaction ID : SA11.96095**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MS. CAROL C. GRIGER**

Mailing Address 1870 MANDEVILLE CANYON RD.

City State Zip Code  
LOS ANGELES CA 90049-2233

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

Name of Employer Occupation  
DUNARD LTD INVESTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2015  
**Transaction ID : SA11.98241**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00

**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 42 OF 209
	<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

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)  
**Prosperity Action Inc.**

**A. MS. HELEN GROSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2455 E WOODSTONE DR

City HAYDEN State ID Zip Code 83835-8114

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
04 / 27 / 2015  
**Transaction ID : SA11.97719**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**B. MS. HELEN GROSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2455 E WOODSTONE DR

City HAYDEN State ID Zip Code 83835-8114

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
05 / 05 / 2015  
**Transaction ID : SA11.98153**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**C. MR. KEN G. GROSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4319 CONNER CT

City SAN DIEGO State CA Zip Code 92117-4305

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

Name of Employer SSMG SAN DIEGO INC. Occupation DERM-SURGERY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.50

Date of Receipt  
02 / 20 / 2015  
**Transaction ID : SA11.96064**

Amount of Each Receipt this Period  
249.50

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 699.50

**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 43 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
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		<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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. LAURA HAINES**

Mailing Address 115 STEWART AVENUE

City State Zip Code  
ALEXANDRIA VA 22301-1141

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

Name of Employer Occupation  
HARTFORD VICE PRESIDENT

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  
05 / 07 / 2015  
**Transaction ID : SA11.98062**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MICHAEL HALSTEAD**

Mailing Address P.O. BOX 5127

City State Zip Code  
KETCHUM ID 83340-5127

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2015  
**Transaction ID : SA11.96743**

Amount of Each Receipt this Period  
-100.00

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)  
**C. PAUL R. HAMILTON**

Mailing Address 41 W CREEK ST

City State Zip Code  
FREDERICKSBURG TX 78624-

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

Name of Employer Occupation  
NONE RETIRED

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  
04 / 27 / 2015  
**Transaction ID : SA11.97720**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 209
	<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

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)  
**Prosperity Action Inc.**

**A. MS. BOBBYE F. HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 WINDSOR DR  
 City CALHOUN State GA Zip Code 30701-2055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96199**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B. MR. CHRISTOPHER W. HATCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5024 35TH ST N  
 City ARLINGTON State VA Zip Code 22207-2816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WILLIAMS & JENSEN PLLC Occupation ATTORNEY  
 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  
 05 / 22 / 2015  
**Transaction ID : SA11.98310**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. MRS. MARGARET HEATH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5015 GREYHAWK PL  
 City APEX State NC Zip Code 27539-9323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF( )  
 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  
 02 / 12 / 2015  
**Transaction ID : SA11.96038**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 45 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. PATRIC HENDERSHOTT**  
 Mailing Address 1801 EAST CANYON WREN WAY  
 City State Zip Code  
 GREEN VALLEY AZ 85614-6034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE 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  
 02 / 23 / 2015  
**Transaction ID : SA11.96078**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MRS. KRISTIN HAYLER HERTEL**  
 Mailing Address 676 N. MICHIGAN AVE. STE. 4000  
 City State Zip Code  
 CHICAGO IL 60611-2895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA11.98312**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. FRANK D. HILL**  
 Mailing Address 710 NW 41ST ST  
 City State Zip Code  
 OKLAHOMA CITY OK 73118-7030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF EMPLOYED ATTORNEY  
 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  
 04 / 09 / 2015  
**Transaction ID : SA11.97578**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00  
**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 46 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Prosperity Action Inc.**

**A. MR. OLAV HINKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5400 SNAPPER CREEK RD  
 City CORAL GABLES State FL Zip Code 33156-3446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF  
 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  
 05 / 04 / 2015  
**Transaction ID : SA11.98145**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. MR. ROY F. HODGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 663  
 City DUMAS State MS Zip Code 38625-0663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015  
**Transaction ID : SA11.96340**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. MR. ROY F. HODGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 663  
 City DUMAS State MS Zip Code 38625-0663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015  
**Transaction ID : SA11.97063**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 209
	<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)  
**Prosperity Action Inc.**

**A. MR. ROY F. HODGES**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 663

City DUMAS State MS Zip Code 38625-0663

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

Name of Employer NONE 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  
 06 / 03 / 2015  
**Transaction ID : SA11.98511**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**B. MR. JOHN HOEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 352 AYR HILL AVE. NE

City VIENNA State VA Zip Code 22180-4725

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

Name of Employer ALTRIA CLIENT SERVICES Occupation SENIOR DIRECTOR

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  
 02 / 17 / 2015  
**Transaction ID : SA11.96149**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C. JOHN HOLLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 199 TONY AVE

City BOWLING GREEN State KY Zip Code 42103-9786

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

Name of Employer NONE 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  
 04 / 07 / 2015  
**Transaction ID : SA11.97277**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. KIM HOWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 THEODORE WIRTH PKWY #401  
 City MINNEAPOLIS State MN Zip Code 55422-5341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TEACHERS ON CALL Occupation CEO  
 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  
 02 / 05 / 2015  
**Transaction ID : SA11.95888**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B. JAMES HRUSKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9021 S 83RD CT  
 City HICKORY HILLS State IL Zip Code 60457-1419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96557**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. ALLAN HUBBARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5600 SUNSET LANE  
 City INDIANAPOLIS State IN Zip Code 46228-1446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer E&A INDUSTRIES, INC. Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11.98611**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 49 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. RANDALL HUSMANN**

Mailing Address 1307 BITTERSWEET DR

City State Zip Code  
RICHMOND TX 77406-6534

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

Name of Employer Occupation  
ASSET PLUS COMPANIES CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 04 / 12 / 2015  
**Transaction ID : SA11.97521**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. RANDALL HUSMANN**

Mailing Address 1307 BITTERSWEET DR

City State Zip Code  
RICHMOND TX 77406-6534

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

Name of Employer Occupation  
ASSET PLUS COMPANIES CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98409**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RANDALL HUSMANN**

Mailing Address 1307 BITTERSWEET DR

City State Zip Code  
RICHMOND TX 77406-6534

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

Name of Employer Occupation  
ASSET PLUS COMPANIES CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98642**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**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: (check only one)	PAGE 50 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. DAVID A. HUTCHISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 154 BRIARWOOD NORTH  
 City OAK BROOK State IL Zip Code 60523-8718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015  
**Transaction ID : SA11.96462**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B. MR. RICHARD H. HUTCHINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 GREY GULL RD  
 City JAMESTOWN State RI Zip Code 02835-2808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2015  
**Transaction ID : SA11.97580**  
 Amount of Each Receipt this Period  
 400.00  
 CONTRIBUTION

**C. THOMAS JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 OAK RIDGE DR  
 City PFLUGERVILLE State TX Zip Code 78660-2819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF EMPLOYED REAL ESTATE  
 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 / 19 / 2015  
**Transaction ID : SA11.96869**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. CLAIRE JOHNSON**

Mailing Address 2900 THOMAS AVE S #1806

City MINNEAPOLIS	State MN	Zip Code 55416-4480
---------------------	-------------	------------------------

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

Name of Employer GENERAL MILLS	Occupation FINANCE
-----------------------------------	-----------------------

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 / 17 / 2015  
**Transaction ID : SA11.96844**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. TODD JOHNSON**

Mailing Address 721 RIDGEWOOD ROAD

City DULUTH	State MN	Zip Code 55804-1732
----------------	-------------	------------------------

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

Name of Employer CAPSTAN CORPORATION	Occupation CEO
---	-------------------

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 / 22 / 2015  
**Transaction ID : SA11.96073**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MS. HARRIET L. JONES**

Mailing Address 1621 OREGON AVE S

City MINNEAPOLIS	State MN	Zip Code 55426-2034
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

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 / 11 / 2015  
**Transaction ID : SA11.96731**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 52 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. BRADLEY L. KADING**  
 Mailing Address 522 9TH ST SE  
 City State Zip Code  
 WASHINGTON DC 20003-2838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ABIR PRESIDENT  
 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  
 03 / 20 / 2015  
**Transaction ID : SA11.96893**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JERRY KATLIN**  
 Mailing Address 9648 LEE BLVD  
 City State Zip Code  
 LEAWOOD KS 66206-2263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EXCEL CONSTRUCTORS CFO  
 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 / 15 / 2015  
**Transaction ID : SA11.96800**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. LEE KEARNEY**  
 Mailing Address 7611 SE EVERGREEN HIGHWAY  
 City State Zip Code  
 VANCOUVER WA 98664-1721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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  
 05 / 07 / 2015  
**Transaction ID : SA11.98174**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**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 53 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Prosperity Action Inc.**

**A. MR. PHIL J. KEENAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4825 PASEO DE LAS TORTUGAS

City TORRANCE State CA Zip Code 90505-6337

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 05 / 2015

**Transaction ID : SA11.95699**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

**B. MR. PHIL J. KEENAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4825 PASEO DE LAS TORTUGAS

City TORRANCE State CA Zip Code 90505-6337

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2015

**Transaction ID : SA11.97225**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C. MS. LINDA KENDALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 CLUB HOUSE RD

City KEY LARGO State FL Zip Code 33037-3600

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : SA11.96599**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Prosperity Action Inc.**

**A. MR. THOMAS J. KESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 29837 DEVONSHIRE OVAL

City WESTLAKE	State OH	Zip Code 44145-3898
------------------	-------------	------------------------

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

Name of Employer LOUIS CORP	Occupation OWNER OPERATOR
--------------------------------	------------------------------

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	/	11	/	2015

**Transaction ID : SA11.96728**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. KEVIN KESTER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 68102 SLACKS CANYON RD

City SAN MIGUEL	State CA	Zip Code 93451-9765
--------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

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	/	05	/	2015

**Transaction ID : SA11.96660**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. KEVIN KESTER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 68102 SLACKS CANYON RD

City SAN MIGUEL	State CA	Zip Code 93451-9765
--------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

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
05	/	07	/	2015

**Transaction ID : SA11.98211**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. BOB KIMBALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 928 TODD DR SUITE 1

City JANESVILLE State WI Zip Code 53546-5202

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
04 / 07 / 2015  
Transaction ID : SA11.97266

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. JEFFREY KIMBELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 601 13TH STREET NW STE 650N

City WASHINGTON State DC Zip Code 20005-3811

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

Name of Employer Occupation  
JEFFREY J. KIMBELL AND ASSOCIATES OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 09 / 2015  
Transaction ID : SA11.96751

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. PATRICIA KIPP**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1881

City PARK CITY State UT Zip Code 84060-1881

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
03 / 11 / 2015  
Transaction ID : SA11.96742

Amount of Each Receipt this Period  
-25.00

CONTRIBUTION

CHARGED BACK

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1225.00

**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 56 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ANDREW J. KLEEGER**

Mailing Address 4 PEACH LOT PLACE

City WESTPORT State CT Zip Code 06880-2739

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

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  
 05 / 07 / 2015  
**Transaction ID : SA11.98176**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DR. ALFRED KOBAK**

Mailing Address 2403 SHERWOOD DR

City VALPARAISO State IN Zip Code 46385-2873

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN & PROFESSOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2015  
**Transaction ID : SA11.98549**

Amount of Each Receipt this Period  
25.00

CONTRIBUTION

REFUNDED \$25.00 ON 06/24/2015

Full Name (Last, First, Middle Initial)  
**C. GARY KOVACS**

Mailing Address 2528 W 234TH ST

City TORRANCE State CA Zip Code 90505-3115

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

Name of Employer NONE Occupation RETIRED

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  
 02 / 17 / 2015  
**Transaction ID : SA11.95940**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 675.00

**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 57 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. GARY KOVACS**

Mailing Address 2528 W 234TH ST

City State Zip Code  
TORRANCE CA 90505-3115

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

Name of Employer Occupation  
NONE RETIRED

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 / 11 / 2015  
**Transaction ID : SA11.96782**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. GARY KOVACS**

Mailing Address 2528 W 234TH ST

City State Zip Code  
TORRANCE CA 90505-3115

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

Name of Employer Occupation  
NONE RETIRED

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 / 28 / 2015  
**Transaction ID : SA11.97343**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GARY KOVACS**

Mailing Address 2528 W 234TH ST

City State Zip Code  
TORRANCE CA 90505-3115

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

Name of Employer Occupation  
NONE RETIRED

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  
 04 / 13 / 2015  
**Transaction ID : SA11.97525**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 58 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. GARY KOVACS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2528 W 234TH ST  
 City TORRANCE State CA Zip Code 90505-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2015  
**Transaction ID : SA11.97913**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. GARY KOVACS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2528 W 234TH ST  
 City TORRANCE State CA Zip Code 90505-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015  
**Transaction ID : SA11.98413**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. GARY KOVACS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2528 W 234TH ST  
 City TORRANCE State CA Zip Code 90505-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98674**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**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 59 OF 209  
(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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. PAUL R. KUHL**

Mailing Address 18 KUHL RD

City State Zip Code  
FLEMINGTON NJ 08822-6800

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

Name of Employer Occupation  
KUHL CORP CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 24 / 2015

Transaction ID : SA11.96446

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOSHUA H. LANE**

Mailing Address 607 WEST END AVE

City State Zip Code  
NEW YORK NY 10024-1606

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : SA11.98143

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. PAUL LAVINS**

Mailing Address 15230 WINDMILL POINTE DR

City State Zip Code  
GROSSE POINTE PARK MI 48230-1719

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2015

Transaction ID : SA11.96651

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

**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 60 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. ERIC L. LESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 W GOLDFIELD AVENUE  
 City YERINGTON State NV Zip Code 89447-3312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US CAPITAL RESOURCES Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 11 / 2015  
**Transaction ID : SA11.98231**  
 Amount of Each Receipt this Period 2500.00  
 CONTRIBUTION

**B. MR. RICHARD T. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2871 WULFERT ROAD  
 City SANIBEL State FL Zip Code 33957-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUPERIOR BUCK LOGISTICS INC Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 07 / 2015  
**Transaction ID : SA11.98177**  
 Amount of Each Receipt this Period 225.00  
 CONTRIBUTION

**C. MR. JOHN LILLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1340 N WAUKEGAN RD  
 City LAKE FOREST State IL Zip Code 60045-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2015  
**Transaction ID : SA11.96659**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3725.00  
**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 61 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. GEORGE LIMBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9450 NEWNAN CIR  
 City PORT CHARLOTTE State FL Zip Code 33981-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96449**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. WALTER LUNDELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 WILLIAMSBURG LANE  
 City HOUSTON State TX Zip Code 77024-5128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation OIL & GAS INVESTMENT  
 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  
 05 / 05 / 2015  
**Transaction ID : SA11.98161**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. TINA LUNDGREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 650 PARK AVE  
 City NEW YORK State NY Zip Code 10065-6115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 04 / 30 / 2015  
**Transaction ID : SA11.98013**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 62 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. JOYCE LUNSFORD**  
 Mailing Address 3090 JOHNSON ROAD  
 City State Zip Code  
 STEVENSVILLE MI 49127-1270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TRIGO HOSPITALITY RESTAURANT FRANCHISEE  
 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  
 01 / 21 / 2015  
**Transaction ID : SA11.95805**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROSS MANIRE**  
 Mailing Address 665 PLUMTREE ROAD  
 City State Zip Code  
 GLEN ELLYN IL 60137-4234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EXTENET SYSTEMS, INC. MGT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2015  
**Transaction ID : SA11.98213**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JAY MCANINCH**  
 Mailing Address 6044 ROCKTON COURT  
 City State Zip Code  
 CENTREVILLE VA 20121-3082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ARCHERY TRADE ASSOCIATION CEO/PRESIDENT  
 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  
 01 / 15 / 2015  
**Transaction ID : SA11.95739**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 63 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. THOMAS MCCONOMY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 413 WOODLAND ROAD  
 City SEWICKLEY State PA Zip Code 15143-1050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 23 / 2015  
**Transaction ID : SA11.97703**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**B. LUCIUS B. MCKELVEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 338 BENTLEYVUILLE ROAD  
 City CHAGRIN FALLS State OH Zip Code 44022-2414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2015  
**Transaction ID : SA11.98219**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. MR. CASSANDRA L. MCNAMARA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 316  
 City CLIO State CA Zip Code 96106-0316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : SA11.96356**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 64 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. CASSANDRA L. MCNAMARA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 316  
 City State Zip Code  
 CLIO CA 96106-0316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC  
 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  
 04 / 07 / 2015  
**Transaction ID : SA11.97276**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**B. JOHN MERRILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 557  
 City State Zip Code  
 STANARDSVILLE VA 22973-0557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96521**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. FRANKIE MINOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 786 CHRIS BARNEY ROAD  
 City State Zip Code  
 DRYDEN VA 24243-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CHESTNUT GROVE ASSISTED LIVING OWNER  
 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  
 01 / 29 / 2015  
**Transaction ID : SA11.95841**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 65 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. GARLAND C. MISENER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1944 JAYA DR  
 City SHERRILLS FORD State NC Zip Code 28673-7291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96450**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. PATRICK MOELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2251  
 City BEACH HAVEN State NJ Zip Code 08008-0134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CALLAN & MOELLER CONS. Occupation BUILDER/DEVELOPER  
 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96513**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MRS. DONNA M. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7000 SW 130TH AVENUE  
 City BEAVERTON State OR Zip Code 97008-5116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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 / 13 / 2015  
**Transaction ID : SA11.96056**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 66 OF 209  
(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)  
**Prosperity Action Inc.**

**A. MRS. DONNA M. MOORE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

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
03	/	26	/	2015

**Transaction ID : SA11.97064**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. MRS. DONNA M. MOORE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

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
04	/	23	/	2015

**Transaction ID : SA11.97676**

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

**C. MRS. DONNA M. MOORE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

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
04	/	28	/	2015

**Transaction ID : SA11.97794**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MRS. DONNA M. MOORE**

Mailing Address 7000 SW 130TH AVENUE

City State Zip Code  
BEAVERTON OR 97008-5116

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

Name of Employer Occupation  
NONE RETIRED

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  
 06 / 18 / 2015  
**Transaction ID : SA11.98553**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BEN T. MORRIS**

Mailing Address 314 E COWAN DR

City State Zip Code  
HOUSTON TX 77007-5026

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

Name of Employer Occupation  
EDELMAN FINANCIAL FINANCIAL ADVISOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : SA11.97835**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. STEPHEN MOSLING**

Mailing Address 6075 PELICAN BAY BLVD APT 1202

City State Zip Code  
NAPLES FL 34108-7114

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2015  
**Transaction ID : SA11.96465**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3550.00

**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 68 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. PETER MOYER**  
 Mailing Address 118 ABBEY PEAK LANE  
 City State Zip Code  
 INCLINE VILLAGE NV 89451-9386  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2015  
**Transaction ID : SA11.96615**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. PETER MOYER**  
 Mailing Address 118 ABBEY PEAK LANE  
 City State Zip Code  
 INCLINE VILLAGE NV 89451-9386  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : SA11.98140**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BIRCH M. MULLINS**  
 Mailing Address 201 S WARSON RD  
 City State Zip Code  
 SAINT LOUIS MO 63124-1207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BAUR PROPERTIES REAL ESTATE  
 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 / 24 / 2015  
**Transaction ID : SA11.96363**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 69 OF 209
	<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)  
**Prosperity Action Inc.**

**A. MR. RICHARD NGIRAIN GAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 86-224 ALAMIHI ST.  
 City WAIANAE State HI Zip Code 96792-2916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation PASTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt 02 / 27 / 2015  
**Transaction ID : SA11.96496**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. JAMES NOLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8900 INDIAN CREEK PARKWAY STE. 200  
 City OVERLAND PARK State KS Zip Code 66210-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE NOLAN COMPANY Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 19 / 2015  
**Transaction ID : SA11.96872**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**C. MS. CAROL KING NOLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3831 FOREST GLEN DR  
 City BIRMINGHAM State AL Zip Code 35213-3915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 450.00

Date of Receipt 03 / 11 / 2015  
**Transaction ID : SA11.96703**  
 Amount of Each Receipt this Period 450.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 209
	<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)  
**Prosperity Action Inc.**

**A. MR. PATRICIA M. O' BRIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 535 E 86TH ST # 20D  
 City NEW YORK State NY Zip Code 10028-7533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96609**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. ROBERT OSBORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7720 CALLIE COURT  
 City O FALLON State MO Zip Code 63368-6792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96190**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. ROBERT OSBORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7720 CALLIE COURT  
 City O FALLON State MO Zip Code 63368-6792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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 / 26 / 2015  
**Transaction ID : SA11.97128**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. ROBERT OSBORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7720 CALLIE COURT  
 City O FALLON State MO Zip Code 63368-6792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 04 / 30 / 2015  
**Transaction ID : SA11.98134**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. JACK PASINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4280 GALT OCEAN DRIVE #11P  
 City FT LAUDERDALE State FL Zip Code 33308-6126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 04 / 30 / 2015  
**Transaction ID : SA11.98006**  
 Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**C. JACK PASINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4280 GALT OCEAN DRIVE #11P  
 City FT LAUDERDALE State FL Zip Code 33308-6126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 05 / 31 / 2015  
**Transaction ID : SA11.98487**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. JACK PASINI**

Mailing Address 4280 GALT OCEAN DRIVE #11P

City State Zip Code  
FT LAUDERDALE FL 33308-6126

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

Name of Employer Occupation  
NONE RETIRED

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  
 06 / 26 / 2015  
**Transaction ID : SA11.98685**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. RICHARD PAVELSKI**

Mailing Address 145 CHESHIRE WAY

City State Zip Code  
NAPLES FL 34110-4408

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

Name of Employer Occupation  
HEARTLAND FARMS, INC. FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 29 / 2015  
**Transaction ID : SA11.97374**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MS. JOSEPHINE PETERSON**

Mailing Address 3080 TULAROSA LANE

City State Zip Code  
LAS VEGAS NV 89122-3348

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

Name of Employer Occupation  
NONE 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 / 11 / 2015  
**Transaction ID : SA11.96727**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

**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 73 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MS. JOSEPHINE PETERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3080 TULAROSA LANE  
 City LAS VEGAS State NV Zip Code 89122-3348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 11 / 2015  
**Transaction ID : SA11.98230**  
 Amount of Each Receipt this Period 150.00  
 CONTRIBUTION

**B. MR. RONALD G. PETER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 DEERFIELD DR  
 City ONEONTA State NY Zip Code 13820-4689  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 07 / 2015  
**Transaction ID : SA11.97278**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. DR. WILLIAM PETTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4805 SHADY MAPLE LN  
 City WINSTON SALEM State NC Zip Code 27106-8747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : SA11.96369**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 74 OF 209
	<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)  
**Prosperity Action Inc.**

**A. MR. RAYMOND PLANK**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 APACHE RD

City CLEARMONT State WY Zip Code 82835-9703

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
03 / 26 / 2015  
Transaction ID : SA11.97143

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. MARIE POOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2107 TWIN SILO DRIVE

City BLUE BELL State PA Zip Code 19422-3277

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
03 / 26 / 2015  
Transaction ID : SA11.97158

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. MARIE POOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2107 TWIN SILO DRIVE

City BLUE BELL State PA Zip Code 19422-3277

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
06 / 05 / 2015  
Transaction ID : SA11.98521

Amount of Each Receipt this Period  
375.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1125.00

**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 75 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. HUGH K. PRATT**  
 Mailing Address 4275 OWENS RD APT 1141  
 City State Zip Code  
 EVANS GA 30809-3085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96584**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DANIEL PROCTOR**  
 Mailing Address 5401 VERNER DR  
 City State Zip Code  
 LA PALMA CA 90623-2043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TRI WEST WHOLESALE  
 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96469**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. JOSEPH M. PUPINO**  
 Mailing Address 60 KNICKERBOCKER RD APT 7  
 City State Zip Code  
 DUMONT NJ 07628-2635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2015  
**Transaction ID : SA11.96463**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 76 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MRS. LENORA H. PUSTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 W SUNFLOWER DRIVE  
 City PAYSON State AZ Zip Code 85541-6152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt 02 / 27 / 2015  
**Transaction ID : SA11.96498**  
 Amount of Each Receipt this Period 125.00  
 CONTRIBUTION

**B. MRS. LENORA H. PUSTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 W SUNFLOWER DRIVE  
 City PAYSON State AZ Zip Code 85541-6152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt 05 / 08 / 2015  
**Transaction ID : SA11.98226**  
 Amount of Each Receipt this Period 1500.00  
 CONTRIBUTION

**C. MARIE H. PUTNAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2055 N 26TH W  
 City IDAHO FALLS State ID Zip Code 83402-5320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 04 / 27 / 2015  
**Transaction ID : SA11.98833**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION  
 REFUNDED \$100.00 ON 06/17/2015

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1725.00  
**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 77 OF 209
	<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)  
**Prosperity Action Inc.**

**A. PATRICK RAFFANIELLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1099 NEW YORK AVE NW STE 625

City WASHINGTON	State DC	Zip Code 20001-4451
--------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2015  
**Transaction ID : SA11.96143**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

IN-KIND: EVENT FACILITY RENTAL

**B. DENISE REMPE**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 LAW RD

City BRIARCLIFF MANOR	State NY	Zip Code 10510-2108
--------------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 24 / 2015  
**Transaction ID : SA11.96435**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. ANTHONY RODA**  
Full Name (Last, First, Middle Initial)

Mailing Address 3416 OLD DOMINION BLVD

City ALEXANDRIA	State VA	Zip Code 22305-1320
--------------------	-------------	------------------------

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

Name of Employer WILLIAMS & JENSEN, PLLC	Occupation ATTORNEY
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2015  
**Transaction ID : SA11.96799**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial) <b>A. MR. JAMES W. ROOT</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2015 <b>Transaction ID : SA11.96962</b>
Mailing Address 215 ARMSTRONG DR		Amount of Each Receipt this Period 500.00
City GEORGETOWN	State TX	Zip Code 78633-5133
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. ROBERT ROSELLINI</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2015 <b>Transaction ID : SA11.97379</b>
Mailing Address 2201 BROADWAY EAST		Amount of Each Receipt this Period 100.00
City SEATTLE	State WA	Zip Code 98102-4135
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF EMPLOYED	Occupation RESTAURANT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. ROBERT ROSELLINI</b>		Date of Receipt MM / DD / YYYY 04 / 29 / 2015 <b>Transaction ID : SA11.97966</b>
Mailing Address 2201 BROADWAY EAST		Amount of Each Receipt this Period 100.00
City SEATTLE	State WA	Zip Code 98102-4135
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF EMPLOYED	Occupation RESTAURANT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 209
	<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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ROBERT ROSELLINI**

Mailing Address **2201 BROADWAY EAST**

City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98102-4135</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF EMPLOYED</b>	Occupation <b>RESTAURANT SERVICES</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2015

**Transaction ID : SA11.98438**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. ROBERT ROSELLINI**

Mailing Address **2201 BROADWAY EAST**

City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98102-4135</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF EMPLOYED</b>	Occupation <b>RESTAURANT SERVICES</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

**Transaction ID : SA11.98699**

Amount of Each Receipt this Period  

100.00
--------

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. NANCY B. ROTH**

Mailing Address **8545 CARMEL VALLEY ROAD**

City <b>CARMEL</b>	State <b>CA</b>	Zip Code <b>93923-9556</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

**Transaction ID : SA11.96357**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. NANCY B. ROTH**

Mailing Address **8545 CARMEL VALLEY ROAD**

City <b>CARMEL</b>	State <b>CA</b>	Zip Code <b>93923-9556</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

**Transaction ID : SA11.98142**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. ELLEN ROWE PHILLIPS**

Mailing Address **P.O. BOX 320**

City <b>MADILL</b>	State <b>OK</b>	Zip Code <b>73446-0320</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
---	---

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
04	/	27	/	2015

**Transaction ID : SA11.97770**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. JESSIE RUBY**

Mailing Address **P.O. BOX 800**

City <b>BUDA</b>	State <b>TX</b>	Zip Code <b>78610-0800</b>
---------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>HOMEMAKER</b>
---------------------------------	--------------------------------

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
02	/	13	/	2015

**Transaction ID : SA11.96057**

Amount of Each Receipt this Period  

100.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 209
	<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)  
**Prosperity Action Inc.**

**A. JESSIE RUBY**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 800

City BUDA	State TX	Zip Code 78610-0800
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt  
03 / 26 / 2015  
**Transaction ID : SA11.97130**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. JESSIE RUBY**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 800

City BUDA	State TX	Zip Code 78610-0800
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt  
04 / 20 / 2015  
**Transaction ID : SA11.97637**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C. MR. ROBERT RUST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6670 RIVIERA DR.

City MIAMI	State FL	Zip Code 33146-3529
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt  
05 / 29 / 2015  
**Transaction ID : SA11.98375**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 82 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. NANCY S. SAMPSON**  
 Mailing Address 9614 PARKWOOD CT  
 City State Zip Code  
 FORT MYERS FL 33908-2861  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE HOMEMAKER  
 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 / 26 / 2015  
**Transaction ID : SA11.97142**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. IGNACIO E. SANCHEZ**  
 Mailing Address 11525 LAKE POTOMAC DRIVE  
 City State Zip Code  
 POTOMAC MD 20854-1220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DLA PIPER LLP PARTNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : SA11.96896**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MUNEEER A. SATTER**  
 Mailing Address 676 N. MICHIGAN AVE. STE. 4000  
 City State Zip Code  
 CHICAGO IL 60611-2895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SATTER INVESTMENT MGT. PRIVATE INVESTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA11.98311**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**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 83 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. KENNETH LEE SCHNITZER**  
 Mailing Address 4939 BROOKVIEW DR  
 City State Zip Code  
 DALLAS TX 75220-3917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PARK PLACE DEALERSHIPS CHAIRMAN  
 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 / 2015  
**Transaction ID : SA11.97163**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. KENNETH LEE SCHNITZER**  
 Mailing Address 4939 BROOKVIEW DR  
 City State Zip Code  
 DALLAS TX 75220-3917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PARK PLACE DEALERSHIPS CHAIRMAN  
 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  
 04 / 10 / 2015  
**Transaction ID : SA11.97581**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CHARLES D. SEARS**  
 Mailing Address 3609 VIA LA SELVA  
 City State Zip Code  
 PALOS VERDES ESTAT CA 90274-1115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96407**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 84 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MARY Z. SEIDEL**

Mailing Address 8058 GLENDALE ROAD

City State Zip Code  
CHEVY CHASE MD 20815-5901

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

Name of Employer Occupation  
REINSURANCE ASSOC. OF AMERICA VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.96931**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MS. CAROLYN H. SEIDLE**

Mailing Address 20 STURBRIDGE LN

City State Zip Code  
WAYNE PA 19087-5800

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

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 / 24 / 2015  
**Transaction ID : SA11.96455**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DONALD SHERMAN**

Mailing Address 9475 N SNAKE RIVER DR

City State Zip Code  
JACKSON WY 83001-9347

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2015  
**Transaction ID : SA11.97164**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3850.00

**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 85 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. JAMES SHRODE**

Mailing Address 16442 GRIMAUD LANE

City State Zip Code  
HUNTINGTON BEACH CA 92649-1827

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

Name of Employer Occupation  
NONE 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  
 05 / 07 / 2015  
**Transaction ID : SA11.98209**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERT SIEBEL**

Mailing Address 14325 W. CENTER DRIVE

City State Zip Code  
LAKEWOOD CO 80228-2315

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

Name of Employer Occupation  
CHC, INC. HEALTH CARE MANAGER

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 / 17 / 2015  
**Transaction ID : SA11.95918**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JEANNE SIEGEL**

Mailing Address 781 FIFTH AVE #605

City State Zip Code  
NEW YORK NY 10022-5500

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 29 / 2015  
**Transaction ID : SA11.95861**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**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 86 OF 209  
(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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY SLAVIN**

Mailing Address 63 SUNSET RD

City MASSAPEQUA State NY Zip Code 11758-7541

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 17 / 2015  
**Transaction ID : SA11.96824**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. GEORGE R. SMAWLEY**

Mailing Address 1729 HUTCHINSON LN

City SILVER SPRING State MD Zip Code 20906-5937

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

Name of Employer US GOVERNMENT Occupation ARMY OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 07 / 2015  
**Transaction ID : SA11.98208**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. MATTHEW B. SMITH**

Mailing Address 12 STANDISH RD

City ELLINGTON State CT Zip Code 06029-3636

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

Name of Employer ACCURATE WIRE INC. Occupation CORPORATE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 24 / 2015  
**Transaction ID : SA11.96457**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**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 87 OF 209
	<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)  
**Prosperity Action Inc.**

**A. MS. HELEN P. SNYDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 255 VALLEJO CT

City	State	Zip Code
MILLBRAE	CA	94030-2835

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

Name of Employer	Occupation
NONE	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  
 02 / 24 / 2015  
**Transaction ID : SA11.96195**

Amount of Each Receipt this Period  
 150.00

CONTRIBUTION

**B. MS. HELEN P. SNYDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 255 VALLEJO CT

City	State	Zip Code
MILLBRAE	CA	94030-2835

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

Name of Employer	Occupation
NONE	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  
 04 / 07 / 2015  
**Transaction ID : SA11.97271**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C. MARY LYNN STALEY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 19000

City	State	Zip Code
AVON	CO	81620-9010

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 15 / 2015  
**Transaction ID : SA11.95735**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 209
	<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)  
**Prosperity Action Inc.**

**A. WARRE R. STALEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 19000  
 City AVON State CO Zip Code 81620-9010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 15 / 2015  
**Transaction ID : SA11.95736**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. MR. CHARLES B. STINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 62  
 City PROSPECT HARBOR State ME Zip Code 04669-0062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 02 / 27 / 2015  
**Transaction ID : SA11.96524**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. NEWBOLD STRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4302 SHEEPS RUN  
 City LAFAYETTE HILL State PA Zip Code 19444-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF( Occupation INFORMATION REQUESTED PER BEST EFF(
 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 / 24 / 2015  
**Transaction ID : SA11.96453**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 89 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MRS. MARY N. STULTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 262 DEERFIELD CIR  
 City KINGWOOD State WV Zip Code 26537-1358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : SA11.96198**  
 Amount of Each Receipt this Period 400.00  
 CONTRIBUTION

**B. WILLIAM STUTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 455 COCONUT PALM RD  
 City VERO BEACH State FL Zip Code 32963-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : SA11.96408**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. WILLIAM STUTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 455 COCONUT PALM RD  
 City VERO BEACH State FL Zip Code 32963-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 07 / 2015  
**Transaction ID : SA11.97280**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1900.00  
**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 90 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. CATHERINE STYZA**  
 Mailing Address 2023 SPRINGBROOK SOUTH  
 City State Zip Code  
 WAUKESHA WI 53186-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RYAN ROAD STORAGE, LLC PROPERTY OWNER/MANAGER  
 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 / 17 / 2015  
**Transaction ID : SA11.95924**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ALAN J. TENNESSEN**  
 Mailing Address 1900 GARLAND LN N  
 City State Zip Code  
 MINNEAPOLIS MN 55447-2274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 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 / 26 / 2015  
**Transaction ID : SA11.97146**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. GARY THOMPSON**  
 Mailing Address 19874 FESTIVAL LOOP  
 City State Zip Code  
 PRINCETON MO 64673-9827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE 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  
 04 / 06 / 2015  
**Transaction ID : SA11.97207**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 91 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. LUCILE THORNTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 735 W HERITAGE LOOP  
 City SEQUIM State WA Zip Code 98382-3171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2015  
**Transaction ID : SA11.96825**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. WOODBURY C. TITCOMB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4901 GULF SHORE BLVD N  
 City NAPLES State FL Zip Code 34103-2223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96361**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. WOODBURY C. TITCOMB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4901 GULF SHORE BLVD N  
 City NAPLES State FL Zip Code 34103-2223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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 / 26 / 2015  
**Transaction ID : SA11.97137**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 209
	<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)  
**Prosperity Action Inc.**

**A. GLENDORA R. TRESCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8523 THACKERY ST APT 6008  
 City DALLAS State TX Zip Code 75225-3915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 24 / 2015  
**Transaction ID : SA11.96197**  
 Amount of Each Receipt this Period 300.00  
 CONTRIBUTION

**B. GLENDORA R. TRESCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8523 THACKERY ST APT 6008  
 City DALLAS State TX Zip Code 75225-3915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 27 / 2015  
**Transaction ID : SA11.97723**  
 Amount of Each Receipt this Period 300.00  
 CONTRIBUTION

**C. MR. MARTIN TRUST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 STILES RD STE. 202  
 City SALEM State NH Zip Code 03079-4802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SANTEX Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 18 / 2015  
**Transaction ID : SA11.98306**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 93 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. MR. CHARLES P. WAITE**

Mailing Address 1200 CALIFORNIA STREET

City State Zip Code  
SAN FRANCISCO CA 94109-0001

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2015  
**Transaction ID : SA11.98150**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MRS. PATRICIA WARREN**

Mailing Address 6373 W 78TH ST

City State Zip Code  
LOS ANGELES CA 90045-1440

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2015  
**Transaction ID : SA11.97279**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LORI WELLS**

Mailing Address P.O. BOX 14

City State Zip Code  
BARRON WI 54812-0014

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

Name of Employer Occupation  
NONE 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 / 28 / 2015  
**Transaction ID : SA11.97358**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 94 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. GREGORY W. WENDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 MARKET ST. STE. 2000  
 City SAN FRANCISCO State CA Zip Code 94105-1411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2015  
**Transaction ID : SA11.95781**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. MS. JOAN M. WHEELER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 198 PINNACLE CIR  
 City SOMERSET State PA Zip Code 15501-4540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2015  
**Transaction ID : SA11.96730**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. MS. BARBARA WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 149 FOUR DIAMOND DR  
 City SEVEN DEVILS State NC Zip Code 28604-8991  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015  
**Transaction ID : SA11.97381**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 95 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MS. BARBARA WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 149 FOUR DIAMOND DR  
 City SEVEN DEVILS State NC Zip Code 28604-8991  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 04 / 29 / 2015  
**Transaction ID : SA11.97909**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. MS. BARBARA WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 149 FOUR DIAMOND DR  
 City SEVEN DEVILS State NC Zip Code 28604-8991  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE 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  
 05 / 26 / 2015  
**Transaction ID : SA11.98450**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. CONNIE WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 MULLIGAN LAKE DR.  
 City MEAD State CO Zip Code 80542-8804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 02 / 24 / 2015  
**Transaction ID : SA11.96447**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**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 96 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MS. JOANNE WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 E BRIAR HOLLOW LN  
 City HOUSTON State TX Zip Code 77027-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVER OAKS FINANCIAL Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 18 / 2015  
**Transaction ID : SA11.95960**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. MS. JOANNE WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 E BRIAR HOLLOW LN  
 City HOUSTON State TX Zip Code 77027-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVER OAKS FINANCIAL Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2015  
**Transaction ID : SA11.96485**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. MS. JOANNE WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 E BRIAR HOLLOW LN  
 City HOUSTON State TX Zip Code 77027-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVER OAKS FINANCIAL Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2015  
**Transaction ID : SA11.97168**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**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 97 OF 209  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

**A. MR. JOHN DAVID WITHERSPOON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 EDAM ST  
 City LANCASTER State CA Zip Code 93536-5788  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 11 / 2015  
**Transaction ID : SA11.96705**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. MR. JOHN DAVID WITHERSPOON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 EDAM ST  
 City LANCASTER State CA Zip Code 93536-5788  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 13 / 2015  
**Transaction ID : SA11.97584**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**C. FRANK WORTHINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1420 D ST  
 City MARYSVILLE State CA Zip Code 95901-4226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WORTHINGTON ENT. LTD Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 11 / 2015  
**Transaction ID : SA11.96744**  
 Amount of Each Receipt this Period -100.00  
 CONTRIBUTION  
 CHARGED BACK

**SUBTOTAL** of Receipts This Page (optional).....▶ 300.00  
**TOTAL** This Period (last page this line number only).....▶ 177899.50

**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 98 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ABBOTT LABS PAC**

Mailing Address 100 ABBOTT PARK RD

City NORTH CHICAGO State IL Zip Code 60064-3502

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.96929**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ABBVIE PAC**

Mailing Address 1 N WAUKEGAN ROAD

City N. CHICAGO State IL Zip Code 60064-1802

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2015  
**Transaction ID : SA11.98286**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AETNA PAC**

Mailing Address 20 F STREET NW STE. 350

City WASHINGTON State DC Zip Code 20001-6706

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 20 / 2015  
**Transaction ID : SA11.97557**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. AFIT PAC**

Mailing Address 1625 PRINCE ST STE 225

City ALEXANDRIA State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA11.98307**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMERICAN ASSOC. OF NURSE ANESTHETISTS PAC**

Mailing Address 25 MASSACHUSETTS AVE. NW STE. 550

City WASHINGTON State DC Zip Code 20001-1408

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2015  
**Transaction ID : SA11.96930**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AMERICAN BANKERS ASSN PAC**

Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2015  
**Transaction ID : SA11.96922**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC**

Mailing Address 6000 AMERICAN PARKWAY

City MADISON	State WI	Zip Code 53783-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2015

**Transaction ID : SA11.95780**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC**

Mailing Address 6000 AMERICAN PARKWAY

City MADISON	State WI	Zip Code 53783-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

**Transaction ID : SA11.96894**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC**

Mailing Address 6000 AMERICAN PARKWAY

City MADISON	State WI	Zip Code 53783-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2015

**Transaction ID : SA11.98309**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 101 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 SEVENTH STREET NW STE. 700

City	State	Zip Code
WASHINGTON	DC	20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2015

**Transaction ID : SA11.96926**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMGEN INC. PAC**

Mailing Address 601 13TH ST NW FL 12

City	State	Zip Code
WASHINGTON	DC	20005-3819

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : SA11.96735**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ANHEUSER-BUSCH COMPANIES INC. PAC**

Mailing Address 1 BUSCH PLACE 202-7

City	State	Zip Code
ST. LOUIS	MO	63118-1849

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2015

**Transaction ID : SA11.98287**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 102 OF 209  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ASSOC. FOR ADVANCED LIFE UNDERWRITING PAC**

Mailing Address 11921 FREEDOM DR. STE. 1100

City RESTON State VA Zip Code 20190-5634

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : SA11.98509**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ASSURANT PAC**

Mailing Address 501 W MICHIGAN ST

City MILWAUKEE State WI Zip Code 53203-2706

FEC ID number of contributing federal political committee. **C C00185694**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2015  
**Transaction ID : SA11.96738**

Amount of Each Receipt this Period  
3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AT&T FEDERAL PAC**

Mailing Address 208 S AKARD ST STE 3521

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2015  
**Transaction ID : SA11.96151**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9000.00

**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 103 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

**A. BLOOMIN' BRANDS INC. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2202 N. WEST SHORE BLVD.  
 City TAMPA State FL Zip Code 33607-5747  
 FEC ID number of contributing federal political committee. **C** C00253153  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2015  
**Transaction ID : SA11.96739**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. BOEING PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 WILSON BLVD  
 City ARLINGTON State VA Zip Code 22209-2300  
 FEC ID number of contributing federal political committee. **C** C00142711  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2015  
**Transaction ID : SA11.96924**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C. BRYAN CAVE LLP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 F STREET NW STE 700  
 City WASHINGTON State DC Zip Code 20004-1312  
 FEC ID number of contributing federal political committee. **C** C00332643  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2015  
**Transaction ID : SA11.98285**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 104 OF 209  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. CHICAGO BOARD OPTIONS EXCHANGE PAC**  
 Mailing Address 400 S. LASALLE STREET  
 City State Zip Code  
 CHICAGO IL 60605-1023  
 FEC ID number of contributing federal political committee. **C** C00100693  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2015  
**Transaction ID : SA11.98533**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CULAC PAC**  
 Mailing Address 601 PENNSYLVANIA AVE NW STE. 600  
 City State Zip Code  
 WASHINGTON DC 20004-2601  
 FEC ID number of contributing federal political committee. **C** C00007880  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : SA11.98508**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DIAGEO NORTH AMERICA INC. EMPLOYEES PAC**  
 Mailing Address 801 MAIN AVE  
 City State Zip Code  
 NORWALK CT 06851-1127  
 FEC ID number of contributing federal political committee. **C** C00034470  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2015  
**Transaction ID : SA11.96921**  
 Amount of Each Receipt this Period  
 330.66  
 CONTRIBUTION  
 IN-KIND: EVENT FACILITY RENTAL/CATERING

**SUBTOTAL** of Receipts This Page (optional).....▶ 10330.66  
**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 105 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

**A. DINEEQUITY INC PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 450 N BRAND BLVD. FL7  
City GLENDALE State CA Zip Code 91203-2346  
FEC ID number of contributing federal political committee. **C** C00530691  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 17 / 2015  
**Transaction ID : SA11.96144**  
Amount of Each Receipt this Period 5000.00  
CONTRIBUTION

**B. DISTILLED SPIRITS PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1250 I STREET NW STE. 400  
City WASHINGTON State DC Zip Code 20005-5977  
FEC ID number of contributing federal political committee. **C** C00030734  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2015  
**Transaction ID : SA11.96900**  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C. EBAY INC. COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 228 S. WASHINGTON ST. STE. 115  
City ALEXANDRIA State VA Zip Code 22314-5404  
FEC ID number of contributing federal political committee. **C** C00342394  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 17 / 2015  
**Transaction ID : SA11.96146**  
Amount of Each Receipt this Period 2500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00  
**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 106 OF 209  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. ENTERPRISE HOLDINGS INC. PAC**

Mailing Address 600 CORPORATE PARK DR

City State Zip Code  
ST. LOUIS MO 63105-4204

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 18 / 2015  
**Transaction ID : SA11.98288**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. FMR LLC PAC**

Mailing Address 82 DEVONSHIRE ST # N5A

City State Zip Code  
BOSTON MA 02109-3605

FEC ID number of contributing federal political committee. **C C00215046**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98819**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HALL RENDER KILLIAN HEATH LYMAN EMP. PAC FEDERAL**

Mailing Address 1 AMERICAN SQ. STE. 2000

City State Zip Code  
INDIANAPOLIS IN 46282-0004

FEC ID number of contributing federal political committee. **C C00552083**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 08 / 2015  
**Transaction ID : SA11.98537**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 107 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

**A. HEWLETT-PACKARD COMPANY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 HANOVER ST. MS1050  
 City PALO ALTO State CA Zip Code 94304-1112  
 FEC ID number of contributing federal political committee. **C** C00196725  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : SA11.98510**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. INDEPENDENT COMMUNITY BANKERS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1615 L STREET NW STE 900  
 City WASHINGTON State DC Zip Code 20036-5623  
 FEC ID number of contributing federal political committee. **C** C00032698  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98822**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. INTUIT INC. 21ST CENTURY LEADERSHIP FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2700 COAST AVE.  
 City MOUNTAIN VIEW State CA Zip Code 94043-1140  
 FEC ID number of contributing federal political committee. **C** C00361741  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : SA11.96736**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. INVESTMENT COMPANY INSTITUTE PAC**

Mailing Address 1401 H STREET NW #1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2015  
**Transaction ID : SA11.98284**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LOCKHEED MARTIN EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DRIVE STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98821**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NAT'L ASSN. OF HOME BUILDERS PAC**

Mailing Address 1201 15TH STREET, NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA11.98308**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 109 OF 209  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL BEER WHOLESALE ASSOCIATION PAC**

Mailing Address 1101 KING ST STE 600

City State Zip Code  
ALEXANDRIA VA 22314-2965

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015  
**Transaction ID : SA11.96923**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NATIONAL FISHERIES INSTITUTE FISHPAC**

Mailing Address 7918 JONES BRANCH DR STE 700

City State Zip Code  
MCLEAN VA 22102-3319

FEC ID number of contributing federal political committee. **C C00101204**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : SA11.98824**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NATIONAL MULTI HOUSING PAC**

Mailing Address 1850 M STREET NW STE. 540

City State Zip Code  
WASHINGTON DC 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2015  
**Transaction ID : SA11.98282**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**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 110 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL ROOFING CONTRACTORS ASSOC. PAC**

Mailing Address 10255 W. HIGGINS ROAD #600

City ROSEMONT	State IL	Zip Code 60018-5613
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

**Transaction ID : SA11.96148**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NATIONAL ROOFING CONTRACTORS ASSOC. PAC**

Mailing Address 10255 W. HIGGINS ROAD #600

City ROSEMONT	State IL	Zip Code 60018-5613
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2015

**Transaction ID : SA11.98536**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NORTHWESTERN MUTUAL PAC**

Mailing Address 720 E WISCONSIN AVE

City MILWAUKEE	State WI	Zip Code 53202-4703
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

**Transaction ID : SA11.96892**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 111 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

**A. NTRA HORSE PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2525 HARRODSBURG ROAD

City	State	Zip Code
LEXINGTON	KY	40504-3355

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : SA11.96737**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**B. PRAXAIR INC. PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2958

City	State	Zip Code
DANBURY	CT	06813-2958

FEC ID number of contributing federal political committee. **C** C00283440

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

**Transaction ID : SA11.96152**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**C. RGA REINSURANCE COMPANY FEDERAL PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1370 TIMBERLAKE MANOR PKWY.

City	State	Zip Code
CHESTERFIELD	MO	63017-6039

FEC ID number of contributing federal political committee. **C** C00461129

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

**Transaction ID : SA11.96150**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. THE DOW CHEMICAL CO. EMPLOYEES PAC**

Mailing Address 2030 DOW CENTER

City MIDLAND State MI Zip Code 48674-1500

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2015  
**Transaction ID : SA11.98823**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. THE HARTFORD ADVOCATES FUND PAC**

Mailing Address 690 ASYLUM AVE.

City HARTFORD State CT Zip Code 06115-

FEC ID number of contributing federal political committee. **C** C00511444

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2015  
**Transaction ID : SA11.96147**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. THRIVENT FINANCIAL FOR LUTHERANS PAC**

Mailing Address PO BOX 1892

City APPLETON State WI Zip Code 54912-1892

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2015  
**Transaction ID : SA11.96925**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. THRIVENT FINANCIAL FOR LUTHERANS PAC**

Mailing Address **PO BOX 1892**

City **APPLETON** State **WI** Zip Code **54912-1892**

FEC ID number of contributing federal political committee. **C C00121319**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **06 / 26 / 2015**

**Transaction ID : SA11.98820**

Amount of Each Receipt this Period **4000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. TROUTMAN SANDERS LLP PAC**

Mailing Address **600 PEACHTREE ST. STE. 5200**

City **ATLANTA** State **GA** Zip Code **30308-2231**

FEC ID number of contributing federal political committee. **C C00311142**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 30 / 2015**

**Transaction ID : SA11.96927**

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. UBS AMERICAS INC. PAC**

Mailing Address **400 ATLANTIC ST**

City **STAMFORD** State **CT** Zip Code **06901-3512**

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : SA11.96928**

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>10000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 114 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Prosperity Action Inc.**

**A. UNUM PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1 FOUNTAIN SQUARE  
City CHATTANOOGA State TN Zip Code 37402-1307  
FEC ID number of contributing federal political committee. **C** C00177436  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 17 / 2015  
**Transaction ID : SA11.96145**  
Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

**B. VERIZON WIRELESS GOOD GOVERNMENT CLUB PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1300 I STREET NW 4TH FL  
City WASHINGTON State DC Zip Code 20005-3314  
FEC ID number of contributing federal political committee. **C** C00186288  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 20 / 2015  
**Transaction ID : SA11.96895**  
Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

**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  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	178830.66

**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 115 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. RYAN PROSPERITY ACTION INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2470 DANIELL'S BRIDGE RD.  
 STE. 121  
 City Athens State GA Zip Code 30606-6191  
 FEC ID number of contributing federal political committee. **C** C00494476  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 83099.18

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.96901**  
 Amount of Each Receipt this Period 1225.08  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW

**B. HERNAN R. FRANCO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address COND. PLAYABLANCA APT 901  
 City CAROLINA State PR Zip Code 00979-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF EMPLOYED ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.96902**  
 Amount of Each Receipt this Period 2300.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**C. RYAN PROSPERITY ACTION INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2470 DANIELL'S BRIDGE RD.  
 STE. 121  
 City Athens State GA Zip Code 30606-6191  
 FEC ID number of contributing federal political committee. **C** C00494476  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 83099.18

Date of Receipt 05 / 18 / 2015  
**Transaction ID : SA12.98283**  
 Amount of Each Receipt this Period 70018.24  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	71243.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. ROBERT P. CASTRIGNANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 IDLEWOOD DR  
 City STAMFORD State CT Zip Code 06905-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SANDLERS O'NEILL Occupation INVESTMENT BANKING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.98295**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**B. ERIC H. CHERN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3824 SUNSET LN  
 City NORTHBROOK State IL Zip Code 60062-1805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHICAGO TRADING CO Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 01 / 2015  
**Transaction ID : SA12.98302**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**C. STEVEN D. HOLZMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 9360  
 City KETCHUM State ID Zip Code 83340-7145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VANTIS CAPITAL MANAGEMENT Occupation MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.98294**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 117 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. ROBERT H. HUFFMAN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1033 SKOKIE BLVD,STE 470  
 City NORTHBROOK State IL Zip Code 60062-4139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RELATIVE VALUE PARTNERS Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 01 / 2015  
**Transaction ID : SA12.98303**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**B. ROBERT KNAKAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 PARK AVE APT 1702  
 City NEW YORK State NY Zip Code 10016-3492  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CUSHMAN & WAKEFIELD Occupation BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 04 / 22 / 2015  
**Transaction ID : SA12.98289**  
 Amount of Each Receipt this Period 2300.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**C. WILLIAM C. KUNKLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 NORTH LAKE SHORE  
 City CHICAGO State IL Zip Code 60610-6686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CC INDUSTRIES, INC. Occupation EVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 01 / 2015  
**Transaction ID : SA12.98299**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. DANIEL S. LOEB**  
Full Name (Last, First, Middle Initial)

Mailing Address 1790 BROADWAY STE 705

City NEW YORK State NY Zip Code 10019-1412

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

Name of Employer THIRD POINT LLC Occupation FOUNDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 22 / 2015  
Transaction ID : SA12.98291

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

[MEMO ITEM]

**B. PAUL J. MASSEY JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 275 MADISON AVE 4TH FL

City NEW YORK State NY Zip Code 10016-1101

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

Name of Employer CUSHMAN & WAKEFIELD Occupation DIRECTOR OF INVESTMENT SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 04 / 22 / 2015  
Transaction ID : SA12.98290

Amount of Each Receipt this Period 2300.00

CONTRIBUTION

[MEMO ITEM]

**C. RAYMOND C. NOLTE**  
Full Name (Last, First, Middle Initial)

Mailing Address 406 CARRIAGE LN

City WYCKOFF State NJ Zip Code 07481-2307

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

Name of Employer SKYBRIDGE CAPITAL Occupation CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2015  
Transaction ID : SA12.98296

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 119 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. LYDIA RYAN**

Mailing Address 150 N MICHIGAN AVE, STE 2100

City ALEXANDRIA	State IL	Zip Code 60601-7559
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : SA12.98300**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. PATRICK G. RYAN JR.**

Mailing Address 150 N MICHIGAN AVE, STE 2100

City CHICAGO	State IL	Zip Code 60601-7559
-----------------	-------------	------------------------

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

Name of Employer FOUNDER	Occupation INCISENT
-----------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : SA12.98301**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. PATRICK G. RYAN SR.**

Mailing Address 1001 GREEN BAY RD, PMB 309

City WINNETKA	State IL	Zip Code 60093-1721
------------------	-------------	------------------------

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

Name of Employer RYAN SPECIALTY GROUP	Occupation CEO
--	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : SA12.98305**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. ANTHONY SCARAMOCCI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17 PARKWOODS RD  
City MANHASSET State NY Zip Code 11030-1509  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SKYBRIDGE CAPITAL Occupation ASSET MANAGEMENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 23 / 2015  
Transaction ID : SA12.98292  
Amount of Each Receipt this Period 5000.00  
CONTRIBUTION  
[MEMO ITEM]

**B. DEIDRE SCARAMOCCI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17 PARKWOODS RD  
City MANHASSET State NY Zip Code 11030-1509  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SKYBRIDGE CAPITAL Occupation INVESTOR RELATIONS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 23 / 2015  
Transaction ID : SA12.98293  
Amount of Each Receipt this Period 5000.00  
CONTRIBUTION  
[MEMO ITEM]

**C. WILLIAM D. SMITHBURG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 676 N MICHIGAN AVE, STE 3860  
City CHICAGO State IL Zip Code 60611-2837  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 01 / 2015  
Transaction ID : SA12.98298  
Amount of Each Receipt this Period 2500.00  
CONTRIBUTION  
[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 121 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. ALEXANDER D. STUART**  
Full Name (Last, First, Middle Initial)  
Mailing Address 150 N FIELD #100

City LAKE FOREST	State IL	Zip Code 60045-2583
---------------------	-------------	------------------------

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

Name of Employer NORTH STAR INVESTMENTS	Occupation INVESTMENT MANAGER
--	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : SA12.98297**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**

**B. DONALD R. WILSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address DRW 540 W MADISON ST, STE 2500

City CHICAGO	State IL	Zip Code 60661-2555
-----------------	-------------	------------------------

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

Name of Employer FOUNDER AND CHIEF EXECUTIVE OFFICER	Occupation DRW TRADING
---	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : SA12.98304**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

**C. RYAN PROSPERITY ACTION INC.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2470 DANIELL'S BRIDGE RD.  
STE. 121

City ATHENS	State GA	Zip Code 30606-6191
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C C00494476**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
83099.18

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2015

**Transaction ID : SA12.98534**

Amount of Each Receipt this Period  
11855.86

CONTRIBUTION

SEE ATTRIBUTION BELOW

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11855.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. CHRISTOPHER W. COLLINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 72 HARBOR ST

City MANCHESTER State MA Zip Code 01944-1425

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

Name of Employer FIRST ATLANTIC CAPITAL Occupation REAL ESTATE INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015

**Transaction ID : SA12.98543**

Amount of Each Receipt this Period  
 2700.00

CONTRIBUTION

**[MEMO ITEM]**

**B. STEVEN B. DODGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 110 KAULA LN

City BONITA SPRINGS State FL Zip Code 34134-8523

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

Name of Employer WINDOVER DEVELOPMENT Occupation REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015

**Transaction ID : SA12.98542**

Amount of Each Receipt this Period  
 2700.00

CONTRIBUTION

**[MEMO ITEM]**

**C. JOHN KINGSTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 CHESTNUT ST

City WINCHESTER State MA Zip Code 01890-3019

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

Name of Employer AMG Occupation GENERAL COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015

**Transaction ID : SA12.98541**

Amount of Each Receipt this Period  
 2700.00

CONTRIBUTION

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 123 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)  
**A. SETH A. KLARMAN**

Mailing Address 330 HEATH ST

City CHESTNUT HILL State MA Zip Code 02468-

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

Name of Employer THE BAUPOST GROUP Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA12.98540**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. CHARLES JAMES KOCH**

Mailing Address 186 PARK ST

City NEWTON State MA Zip Code 02458-2044

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

Name of Employer BOSTON BEER COMPANY Occupation CO-FOUNDER/CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA12.98539**

Amount of Each Receipt this Period  
2300.00

CONTRIBUTION

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. ROBERT WHITE**

Mailing Address 23 CHADWICK RD

City WESTON State MA Zip Code 02493-1523

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

Name of Employer BAIN CAPITAL Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : SA12.98538**

Amount of Each Receipt this Period  
2300.00

CONTRIBUTION

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 124 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. RYAN-NRCC VICTORY COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2470 DANIELLS BRDIGE ROAD STE. 121  
 City ATHENS State GA Zip Code 30606-  
 FEC ID number of contributing federal political committee. **C** C00545947  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 18124.06

Date of Receipt 06 / 08 / 2015  
**Transaction ID : SA12.98535**  
 Amount of Each Receipt this Period 18124.06  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW

**B. DANIEL O. DICKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 LYDIA CT  
 City HAWTHORN WOODS State IL Zip Code 60047-9065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 G.A.S. CAPITAL, INC. CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 05 / 27 / 2015  
**Transaction ID : SA12.98544**  
 Amount of Each Receipt this Period 4600.00  
 CONTRIBUTION  
**[MEMO ITEM]**

**C. KENNETH C. GRIFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 S DEARBORN ST  
 City CHICAGO State IL Zip Code 60603-5517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CITADEL LLC CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 30 / 2015  
**Transaction ID : SA12.98548**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18124.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Prosperity Action Inc.**

**A. DAVID C. HUMPHREYS**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 4050

City JOPLIN	State MO	Zip Code 64803-4050
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer TAMKO BUILDING PRODUCTS	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2015  
**Transaction ID : SA12.98546**

Amount of Each Receipt this Period  
4600.00

CONTRIBUTION

**[MEMO ITEM]**

**B. WILLIAM J. HUPP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 405 DAWN AVE

City GLEN ELLYN	State IL	Zip Code 60137-4331
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SELF EMPLOYED	Occupation ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2015  
**Transaction ID : SA12.98545**

Amount of Each Receipt this Period  
4600.00

CONTRIBUTION

**[MEMO ITEM]**

**C. ALEXANDER D. STUART**  
Full Name (Last, First, Middle Initial)  
Mailing Address 150 N FIELD #100

City LAKE FOREST	State IL	Zip Code 60045-2583
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NORTH STAR INVESTMENTS	Occupation INVESTMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2015  
**Transaction ID : SA12.98547**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	101223.24

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CHRIS APPLGATE**

Mailing Address 2716 CALDER CT

City FORT WORTH State TX Zip Code 76107

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2015

**Transaction ID : SB21B.I2590**

Amount of Each Disbursement this Period

500.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. THE HARVARD CLUB OF NY**

Mailing Address 35 W 44TH ST

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement  
PAC EVENT FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2015

**Transaction ID : SB21B.I2591**

Amount of Each Disbursement this Period

500.00

Category/Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. PATRICK RAFFANIELLO**

Mailing Address 1099 NEW YORK AVE NW STE 625

City WASHINGTON State DC Zip Code 20001-4451

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2015

**Transaction ID : SB21B.96143**

Amount of Each Disbursement this Period

500.00

Category/Type

IN-KIND: EVENT FACILITY RENTAL

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

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

1000.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

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  
01 / 16 / 2015

Transaction ID : SB21B.I2478

Amount of Each Disbursement this Period

1702.13

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC MEMBERSHIP DUES 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  
01 / 16 / 2015

Transaction ID : SB21B.I2479

Amount of Each Disbursement this Period

-100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. APPLE STORE**

Mailing Address 1 INFINITE LOOP

City CUPERTINO State CA Zip Code 95014

Purpose of Disbursement  
PAC OFFICE SUPPLIES

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  
01 / 16 / 2015

Transaction ID : SB21B.I2487

Amount of Each Disbursement this Period

165.13

[MEMO ITEM]

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

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

1702.13

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE. NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
PAC EVENT CATERING

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
01		16		2015

Transaction ID : SB21B.I2484

Amount of Each Disbursement this Period

460.05
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC MEETING EXPENSE

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
01		16		2015

Transaction ID : SB21B.I2481

Amount of Each Disbursement this Period

122.50
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CHARLIE PALMER STEAK**

Mailing Address 101 CONSTITUTION AVE. NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
PAC MEETING EXPENSE

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
01		16		2015

Transaction ID : SB21B.I2492

Amount of Each Disbursement this Period

82.50
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[MEMO ITEM]

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 7704 LEESBURG PIKE

City Falls Church State VA Zip Code 22043

Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : SB21B.I2483

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City Memphis State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : SB21B.I2480

Amount of Each Disbursement this Period

35.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City Long Beach State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : SB21B.I2482

Amount of Each Disbursement this Period

11.13

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : SB21B.I2491

Amount of Each Disbursement this Period

158.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

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 / 2015

Transaction ID : SB21B.I2509

Amount of Each Disbursement this Period

3791.18

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
PAC OFFICE SUPPLIES

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 / 2015

Transaction ID : SB21B.I2517

Amount of Each Disbursement this Period

528.45

[MEMO ITEM]

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

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

3791.18

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
PAC AIRFARE

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
02		16		2015

Transaction ID : **SB21B.I2522**

Amount of Each Disbursement this Period

820.40
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
PAC EVENT CATERING

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
02		16		2015

Transaction ID : **SB21B.I2513**

Amount of Each Disbursement this Period

492.49
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City State Zip Code  
FALLS CHURCH VA 22043

Purpose of Disbursement  
PAC SOFTWARE

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
02		16		2015

Transaction ID : **SB21B.I2512**

Amount of Each Disbursement this Period

500.00
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[MEMO ITEM]

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

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

0.00
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

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 / 2015

Transaction ID : SB21B.I2510

Amount of Each Disbursement this Period

31.37

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HADEED CARPET**

Mailing Address 6628 ELECTRONIC DR.

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
PAC OFFICE MAINTENANCE

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 / 2015

Transaction ID : SB21B.I2518

Amount of Each Disbursement this Period

130.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JET BLUE**

Mailing Address 11829 QUEENS BLVD

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement  
PAC AIRFARE

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 / 2015

Transaction ID : SB21B.I2523

Amount of Each Disbursement this Period

103.99

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. REAGAN AIRPORT PARKING**

Mailing Address 1 AVIATION CIRCLE

City ARLINGTON State VA Zip Code 20001

Purpose of Disbursement  
PAC PARKING

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
02	/	16	/	2015

Transaction ID : SB21B.I2519

Amount of Each Disbursement this Period

6.00
------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City LONG BEACH State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

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
02	/	16	/	2015

Transaction ID : SB21B.I2511

Amount of Each Disbursement this Period

22.53
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 77 WEST WACKER DRIVE

City CHICAGO State IL Zip Code 60601

Purpose of Disbursement  
PAC AIRFARE

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
02	/	16	/	2015

Transaction ID : SB21B.I2524

Amount of Each Disbursement this Period

852.40
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[MEMO ITEM]

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

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 / 2015

Transaction ID : **SB21B.I2520**

Amount of Each Disbursement this Period

187.58

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

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 / 2015

Transaction ID : **SB21B.I2536**

Amount of Each Disbursement this Period

1895.53

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
PAC OFFICE SUPPLIES

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 / 2015

Transaction ID : **SB21B.I2548**

Amount of Each Disbursement this Period

180.74

[MEMO ITEM]

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

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

1895.53

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC MEETING EXPENSES/MEMBERSHIP DUES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	5		

Transaction ID : SB21B.I2540

Amount of Each Disbursement this Period

1	3	5	9	5
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	5		

Transaction ID : SB21B.I2541

Amount of Each Disbursement this Period

5	0	0	0	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HADEED CARPET**

Mailing Address 6628 ELECTRONIC DR.

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
PAC OFFICE MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	5		

Transaction ID : SB21B.I2550

Amount of Each Disbursement this Period

1	3	0	0	0
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[MEMO ITEM]

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

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

0	0	0	0	0
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0	0	0	0	0
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. JET BLUE**

Mailing Address 11829 QUEENS BLVD

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

**Transaction ID : SB21B.I2538**

Amount of Each Disbursement this Period

-	1	0	3	.	9	9
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. M&M LIMOUSINE SERVICES**

Mailing Address 2720 S. RIVER ROAD #246

City DES PLAINES State IL Zip Code 60018

Purpose of Disbursement  
PAC TRAVEL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

**Transaction ID : SB21B.I2537**

Amount of Each Disbursement this Period

5	3	4	.	0	0
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. REAGAN AIRPORT PARKING**

Mailing Address 1 AVIATION CIRCLE

City ARLINGTON State VA Zip Code 20001

Purpose of Disbursement  
PAC PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

**Transaction ID : SB21B.I2545**

Amount of Each Disbursement this Period

1	2	.	0	0
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**[MEMO ITEM]**

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

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

0	0	0
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0	0	0
---	---	---

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City LONG BEACH State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

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 / 2015

Transaction ID : SB21B.I2539

Amount of Each Disbursement this Period

50.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 77 WEST WACKER DRIVE

City CHICAGO State IL Zip Code 60601

Purpose of Disbursement  
PAC AIRFARE

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 / 2015

Transaction ID : SB21B.I2543

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

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 / 2015

Transaction ID : SB21B.I2549

Amount of Each Disbursement this Period

156.66

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN ENTERPRISE INSTITUTE**

Mailing Address 1150 17TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PAC FOOD AND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : **SB21B.I2592**

Amount of Each Disbursement this Period

1854.44

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : **SB21B.I2609**

Amount of Each Disbursement this Period

8003.46

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
PAC OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : **SB21B.I2625**

Amount of Each Disbursement this Period

22.95

[MEMO ITEM]

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

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

9857.90

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement PAC MEMBERSHIP DUES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2015

Transaction ID : **SB21B.I2627**

Amount of Each Disbursement this Period: 750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAC MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2015

Transaction ID : **SB21B.I2616**

Amount of Each Disbursement this Period: 206.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement PAC SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2015

Transaction ID : **SB21B.I2617**

Amount of Each Disbursement this Period: 500.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2611

Amount of Each Disbursement this Period

30.76

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GRAND BOHEMIAN HOTEL**

Mailing Address 325 S ORANGE AVE

City ORLANDO State FL Zip Code 32801

Purpose of Disbursement  
PAC LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2620

Amount of Each Disbursement this Period

373.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. M&M LIMOUSINE SERVICES**

Mailing Address 2720 S. RIVER ROAD #246

City DES PLAINES State IL Zip Code 60018

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2610

Amount of Each Disbursement this Period

-257.00

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT HOTELS**

Mailing Address MARRIOTT DR

City WASHINGTON State DC Zip Code 20058

Purpose of Disbursement  
PAC MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2618

Amount of Each Disbursement this Period

6.74

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. REAGAN AIRPORT PARKING**

Mailing Address 1 AVIATION CIRCLE

City ARLINGTON State VA Zip Code 20001

Purpose of Disbursement  
PAC PARKING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2613

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SEA ISLAND**

Mailing Address 100 CLOISTER DR.

City SEA ISLAND State GA Zip Code 31561

Purpose of Disbursement  
PAC MEETING EXPENSE/LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2015

Transaction ID : SB21B.I2612

Amount of Each Disbursement this Period

5946.70

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City LONG BEACH State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	5		

Transaction ID : SB21B.I2615

Amount of Each Disbursement this Period

4	5	.	6	2
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UNITED STATES POST OFFICE**

Mailing Address 475 LENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement  
PAC POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	5		

Transaction ID : SB21B.I2623

Amount of Each Disbursement this Period

1	2	.	1	1
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	1	5		

Transaction ID : SB21B.I2626

Amount of Each Disbursement this Period

1	5	6	.	6	6
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

**Transaction ID : SB21B.I2666**

Amount of Each Disbursement this Period

2250.59

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
PAC OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

**Transaction ID : SB21B.I2672**

Amount of Each Disbursement this Period

27.14

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC MEETING EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

**Transaction ID : SB21B.I2670**

Amount of Each Disbursement this Period

191.33

**[MEMO ITEM]**

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

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

2250.59

**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 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2671

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2668

Amount of Each Disbursement this Period

44.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HADEED CARPET**

Mailing Address 6628 ELECTRONIC DR.

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
PAC OFFICE MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2667

Amount of Each Disbursement this Period

130.00

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS**

Mailing Address 7930 JONES BRANCH DR.

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement PAC LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2015

Transaction ID : SB21B.I2685

Amount of Each Disbursement this Period: 211.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. NEW YORK MARRIOTT MARQUIS**

Mailing Address 1535 BROADWAY

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement PAC LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2015

Transaction ID : SB21B.I2682

Amount of Each Disbursement this Period: 629.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PEAPOD GROCERIES**

Mailing Address 9933 WOODS DRIVE

City SKOKIE State IL Zip Code 60077

Purpose of Disbursement PAC MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2015

Transaction ID : SB21B.I2686

Amount of Each Disbursement this Period: 126.52

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City LONG BEACH State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2669**

Amount of Each Disbursement this Period

28.18

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2678**

Amount of Each Disbursement this Period

159.79

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2015

Transaction ID : **SB21B.I2764**

Amount of Each Disbursement this Period

1841.74

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

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

1841.74

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code  
FORT WORTH TX 76155

Purpose of Disbursement  
PAC AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2015

Transaction ID : SB21B.I2773

Amount of Each Disbursement this Period

454.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
PAC MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2015

Transaction ID : SB21B.I2765

Amount of Each Disbursement this Period

96.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City State Zip Code  
FALLS CHURCH VA 22043

Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2015

Transaction ID : SB21B.I2768

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. HADEED CARPET**

Mailing Address 6628 ELECTRONIC DR.

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
PAC OFFICE CLEANING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

**Transaction ID : SB21B.I2772**

Amount of Each Disbursement this Period

1	3	0	0
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. PALMER HOUSE**

Mailing Address 17 E MONROE ST

City CHGO State IL Zip Code 60603

Purpose of Disbursement  
PAC EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

**Transaction ID : SB21B.I2767**

Amount of Each Disbursement this Period

4	1	1	6
---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. TOLL FREE CONFERENCE CALL**

Mailing Address 4300 E. PACIFIC COAST HWY.

City LONG BEACH State CA Zip Code 90804

Purpose of Disbursement  
PAC CONFERENCE CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

**Transaction ID : SB21B.I2766**

Amount of Each Disbursement this Period

3	1	5	6
---	---	---	---

**[MEMO ITEM]**

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

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

0	0
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0	0
---	---

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address 140 WEST STREET 29TH FLOOR

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement  
PAC TELEPHONE

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
06	/	22	/	2015

Transaction ID : **SB21B.I2774**

Amount of Each Disbursement this Period

156.68
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

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
01	/	05	/	2015

Transaction ID : **SB21B.I2476**

Amount of Each Disbursement this Period

12.00
-------

Full Name (Last, First, Middle Initial)

**C. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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
02	/	03	/	2015

Transaction ID : **SB21B.I2503**

Amount of Each Disbursement this Period

12.40
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

24.40
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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 / 2015

Transaction ID : SB21B.I2535

Amount of Each Disbursement this Period

13.40

Full Name (Last, First, Middle Initial)

**B. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 02 / 2015

Transaction ID : SB21B.I2635

Amount of Each Disbursement this Period

22.80

Full Name (Last, First, Middle Initial)

**C. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

Transaction ID : SB21B.I2695

Amount of Each Disbursement this Period

17.40

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

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

53.60

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City State Zip Code  
SAN FRANCISCO CA 94128

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	5

**Transaction ID : SB21B.I2700**

Amount of Each Disbursement this Period

1	4	.	3	0
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Full Name (Last, First, Middle Initial)

**B. BRAINTREE PAYMENTS**

Mailing Address 111 N CANAL ST STE 455

City State Zip Code  
CHICAGO IL 60606

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	5

**Transaction ID : SB21B.I2507**

Amount of Each Disbursement this Period

1	3	7	0	.	4	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. BRAINTREE PAYMENTS**

Mailing Address 111 N CANAL ST STE 455

City State Zip Code  
CHICAGO IL 60606

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	5

**Transaction ID : SB21B.I2583**

Amount of Each Disbursement this Period

7	0	4	.	9	1
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2	0	8	9	.	6	8
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial) <b>A. BRAINTREE PAYMENTS</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2015
Mailing Address 111 N CANAL ST STE 455		<b>Transaction ID : SB21B.I2648</b>
City CHICAGO	State IL	
Purpose of Disbursement PAC CC TRANSACTION FEES		Amount of Each Disbursement this Period 1608.52
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BRAINTREE PAYMENTS</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2015
Mailing Address 111 N CANAL ST STE 455		<b>Transaction ID : SB21B.I2687</b>
City CHICAGO	State IL	
Purpose of Disbursement PAC CC TRANSACTION FEES		Amount of Each Disbursement this Period 1026.29
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BRAINTREE PAYMENTS</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2015
Mailing Address 111 N CANAL ST STE 455		<b>Transaction ID : SB21B.I2690</b>
City CHICAGO	State IL	
Purpose of Disbursement PAC CC TRANSACTION FEES		Amount of Each Disbursement this Period 860.71
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3495.52
<b>TOTAL</b> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. BRAINTREE PAYMENTS**

Mailing Address 111 N CANAL ST STE 455

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : SB21B.I2779

Amount of Each Disbursement this Period

1110.35

Full Name (Last, First, Middle Initial)

**B. CLARKE & SAMPSON, INC.**

Mailing Address 228 S. WASHINGTON ST. #200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC INSURANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2015

Transaction ID : SB21B.I2588

Amount of Each Disbursement this Period

915.00

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT.

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
PAC CAGING & ESCROW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : SB21B.I2494

Amount of Each Disbursement this Period

1497.54

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

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

3522.89

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT.

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
PAC CAGING & ESCROW

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 / 2015

Transaction ID : **SB21B.I2551**

Amount of Each Disbursement this Period

1630.17

Full Name (Last, First, Middle Initial)

**B. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT.

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
PAC CAGING & ESCROW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : **SB21B.I2593**

Amount of Each Disbursement this Period

809.78

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT.

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
PAC CAGING & ESCROW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : **SB21B.I2642**

Amount of Each Disbursement this Period

2303.44

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

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

4743.39

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT.

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
PAC CAGING & ESCROW

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	5

Transaction ID : **SB21B.I2744**

Amount of Each Disbursement this Period

2	9	1	8	.	5	8
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Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	1	5

Transaction ID : **SB21B.I2495**

Amount of Each Disbursement this Period

2	4	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	1	5

Transaction ID : **SB21B.I2525**

Amount of Each Disbursement this Period

5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

8	1	5	8	.	5	8
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

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 / 2015

Transaction ID : SB21B.I2552

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2594

Amount of Each Disbursement this Period

5250.00

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : SB21B.I2645

Amount of Each Disbursement this Period

5000.00

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

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

15250.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.I2655**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE  
STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
PAC LEGAL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.I2743**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. INTERNAL REVENUE SERVICE**

Mailing Address 10TH ST. & PENNSYLVANIA AVE. NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
PAC TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.I2584**

Amount of Each Disbursement this Period

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MBROWN CREATIVE**

Mailing Address 2707 BRYAN PL

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement  
PAC GRAPHIC DESIGN

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 / 2015

Transaction ID : SB21B.I2554

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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  
01 / 05 / 2015

Transaction ID : SB21B.I2475

Amount of Each Disbursement this Period

36.00

Full Name (Last, First, Middle Initial)

**C. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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  
02 / 02 / 2015

Transaction ID : SB21B.I2502

Amount of Each Disbursement this Period

34.51

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

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

820.51

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 02 / 2015

Transaction ID : **SB21B.I2534**

Amount of Each Disbursement this Period

50.10

Full Name (Last, First, Middle Initial)

**B. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 02 / 2015

Transaction ID : **SB21B.I2634**

Amount of Each Disbursement this Period

250.94

Full Name (Last, First, Middle Initial)

**C. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

Transaction ID : **SB21B.I2694**

Amount of Each Disbursement this Period

112.49

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

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

413.53

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MERCHANT BANKCARD**

Mailing Address 1700 N. DIXIE HWY  
STE. 125

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	01	/	2015

Transaction ID : **SB21B.I2699**

Amount of Each Disbursement this Period

183.40
--------

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	31	/	2015

Transaction ID : **SB21B.I2508**

Amount of Each Disbursement this Period

19.71
-------

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2015

Transaction ID : **SB21B.I2582**

Amount of Each Disbursement this Period

9.54
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

212.65
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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 / 2015

**Transaction ID : SB21B.I2688**

Amount of Each Disbursement this Period

14.48

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

**Transaction ID : SB21B.I2689**

Amount of Each Disbursement this Period

8.16

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2015

**Transaction ID : SB21B.I2691**

Amount of Each Disbursement this Period

6.30

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

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

28.94

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 144 2ND STREET  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

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  
06 / 30 / 2015

Transaction ID : SB21B.I2778

Amount of Each Disbursement this Period

5.04

Full Name (Last, First, Middle Initial)

**B. POLITICAL CAPITAL**

Mailing Address 2668 SCOTT MILL LN

City JACKSONVILLE State FL Zip Code 32223

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

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  
04 / 10 / 2015

Transaction ID : SB21B.I2596

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

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  
01 / 16 / 2015

Transaction ID : SB21B.I2496

Amount of Each Disbursement this Period

1541.76

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

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

1896.80

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

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 / 2015

Transaction ID : SB21B.I2526

Amount of Each Disbursement this Period

1515.29

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2597

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : SB21B.I2643

Amount of Each Disbursement this Period

1500.00

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

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

4515.29

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2656**

Amount of Each Disbursement this Period

1511.96

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES**

Mailing Address 264 N LUMPKIN ST STE 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB21B.I2745**

Amount of Each Disbursement this Period

1502.88

Full Name (Last, First, Middle Initial)

**C. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : **SB21B.I2497**

Amount of Each Disbursement this Period

12238.18

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

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

15253.02

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2015

Transaction ID : SB21B.I2527

Amount of Each Disbursement this Period

46509.23
----------

Full Name (Last, First, Middle Initial)

**B. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Transaction ID : SB21B.I2555

Amount of Each Disbursement this Period

20746.78
----------

Full Name (Last, First, Middle Initial)

**C. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2015

Transaction ID : SB21B.I2599

Amount of Each Disbursement this Period

23972.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

91228.01
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

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  
04 / 30 / 2015

Transaction ID : SB21B.I2644

Amount of Each Disbursement this Period

20405.20

Full Name (Last, First, Middle Initial)

**B. SCM ASSOCIATES**

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

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  
04 / 30 / 2015

Transaction ID : SB21B.I2646

Amount of Each Disbursement this Period

8593.46

Full Name (Last, First, Middle Initial)

**C. SCR & ASSOCIATES**

Mailing Address 100 TRADE CENTER STE. G700

City WOBURN State MA Zip Code 01801

Purpose of Disbursement  
VOID OF PREVIOUS - BILLING ERROR, IMPROPER PAYMENT

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  
05 / 11 / 2015

Transaction ID : SB21B.I2639

Amount of Each Disbursement this Period

-675.00

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

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

28323.66

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC DIGITAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2015

Transaction ID : **SB21B.I2498**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC PRINTING/E-MARKETING/WEB DEVELOPMENT

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 / 2015

Transaction ID : **SB21B.I2528**

Amount of Each Disbursement this Period

15891.96

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC E-MARKETING

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 / 2015

Transaction ID : **SB21B.I2556**

Amount of Each Disbursement this Period

12190.63

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

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

31082.59



**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 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE MEMO

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 / 2015

Transaction ID : SB21B.I2557

Amount of Each Disbursement this Period

20333.46

Full Name (Last, First, Middle Initial)

**B. SOPHIA MELLOS**

Mailing Address 11 D. STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC RENT EXPENSE

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 / 2015

Transaction ID : SB21B.I2564

Amount of Each Disbursement this Period

2100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC MEETING EXPENSE

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 / 2015

Transaction ID : SB21B.I2559

Amount of Each Disbursement this Period

69.50

[MEMO ITEM]

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

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

20333.46

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address P.O. BOX 3005

City State Zip Code  
SOUTHEASTERN PA 19398

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

Transaction ID : **SB21B.I2561**

Amount of Each Disbursement this Period

1	4	8	.	5	9
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PEPSCO**

Mailing Address PO BOX 13608

City State Zip Code  
PHILADELPHIA PA 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

Transaction ID : **SB21B.I2560**

Amount of Each Disbursement this Period

2	1	.	3	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

Transaction ID : **SB21B.I2558**

Amount of Each Disbursement this Period

1	7	8	8	.	9	4
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[MEMO ITEM]

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

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

0	0	0	0
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0	0	0	0
---	---	---	---

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON GAS**

Mailing Address PO BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

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 / 2015

Transaction ID : **SB21B.I2563**

Amount of Each Disbursement this Period

102.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : **SB21B.I2600**

Amount of Each Disbursement this Period

31232.35

Full Name (Last, First, Middle Initial)

**C. SOPHIA MELLOS**

Mailing Address 11 D. STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC RENT EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : **SB21B.I2604**

Amount of Each Disbursement this Period

4200.00

[MEMO ITEM]

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

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

31232.35

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC EVENT CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2607

Amount of Each Disbursement this Period

1791.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. COMCAST**

Mailing Address P.O. BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2602

Amount of Each Disbursement this Period

300.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2608

Amount of Each Disbursement this Period

25.75

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PEPSCO**

Mailing Address PO BOX 13608

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2603

Amount of Each Disbursement this Period

47.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2601

Amount of Each Disbursement this Period

24597.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WASHINGTON GAS**

Mailing Address PO BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2605

Amount of Each Disbursement this Period

262.93

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2660**

Amount of Each Disbursement this Period

28878.61

Full Name (Last, First, Middle Initial)

**B. SOPHIA MELLOS**

Mailing Address 11 D. STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC RENT EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2663**

Amount of Each Disbursement this Period

4200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : **SB21B.I2662**

Amount of Each Disbursement this Period

133.50

[MEMO ITEM]

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

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

28878.61

**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

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PEPSCO**

Mailing Address PO BOX 13608

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2664

Amount of Each Disbursement this Period

22.18

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2661

Amount of Each Disbursement this Period

24415.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WASHINGTON GAS**

Mailing Address PO BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

Transaction ID : SB21B.I2665

Amount of Each Disbursement this Period

107.39

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE MEMO

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
06	/	29	/	2015

Transaction ID : SB21B.I2721

Amount of Each Disbursement this Period

14620.93
----------

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
PAC OFFICE SUPPLIES

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
06	/	29	/	2015

Transaction ID : SB21B.I2726

Amount of Each Disbursement this Period

37.49
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. COMCAST**

Mailing Address P.O. BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
PAC UTILITIES

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
06	/	29	/	2015

Transaction ID : SB21B.I2724

Amount of Each Disbursement this Period

151.91
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[MEMO ITEM]

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

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

14620.93
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**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PEPCO**

Mailing Address PO BOX 13608

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2015

Transaction ID : SB21B.I2723

Amount of Each Disbursement this Period

34.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2015

Transaction ID : SB21B.I2722

Amount of Each Disbursement this Period

14379.89

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WASHINGTON GAS**

Mailing Address PO BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2015

Transaction ID : SB21B.I2725

Amount of Each Disbursement this Period

17.21

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB21B.I2749**

Amount of Each Disbursement this Period

17245.98

Full Name (Last, First, Middle Initial)

**B. SOPHIA MELLOS**

Mailing Address 11 D. STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC RENT EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB21B.I2757**

Amount of Each Disbursement this Period

2100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. COMCAST**

Mailing Address P.O. BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB21B.I2753**

Amount of Each Disbursement this Period

303.79

[MEMO ITEM]

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

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

17245.98

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement  
PAC SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : SB21B.I2754

Amount of Each Disbursement this Period

21.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PEPSCO**

Mailing Address PO BOX 13608

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : SB21B.I2755

Amount of Each Disbursement this Period

20.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : SB21B.I2752

Amount of Each Disbursement this Period

14770.62

[MEMO ITEM]

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

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

0.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON GAS**

Mailing Address PO BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB21B.I2756**

Amount of Each Disbursement this Period

29.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UNITED STATES POST OFFICE**

Mailing Address 475 LENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement  
PAC PO BOX RENEWAL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2015

Transaction ID : **SB21B.I2529**

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POST OFFICE**

Mailing Address 475 LENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement  
PAC POSTAGE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 27 / 2015

Transaction ID : **SB21B.I2640**

Amount of Each Disbursement this Period

685.00

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

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

905.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

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 / 2015

Transaction ID : **SB21B.I2533**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

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 / 2015

Transaction ID : **SB21B.I2586**

Amount of Each Disbursement this Period

3.00

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

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 / 2015

Transaction ID : **SB21B.I2631**

Amount of Each Disbursement this Period

52.00

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

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

67.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2015

Transaction ID : SB21B.I2633

Amount of Each Disbursement this Period

24.00

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2015

Transaction ID : SB21B.I2636

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2015

Transaction ID : SB21B.I2637

Amount of Each Disbursement this Period

12.00

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

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

48.00

**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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO**

Mailing Address 300 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC BANK FEES

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  
05 / 12 / 2015

Transaction ID : SB21B.I2696

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. WYE RIVER COMMUNICATIONS**

Mailing Address 134 WYE RD

City QUEENSTOWN State MD Zip Code 21658

Purpose of Disbursement  
PAC EVENT SUPPLIES

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  
04 / 10 / 2015

Transaction ID : SB21B.I2598

Amount of Each Disbursement this Period

2955.02

Full Name (Last, First, Middle Initial)

**C. DIAGEO NORTH AMERICA INC. EMPLOYEES PAC**

Mailing Address 801 MAIN AVE

City NORWALK State CT Zip Code 06851-1127

Purpose of Disbursement  
IN-KIND CONTRIBUTION

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 / 2015

Transaction ID : SB21B.96921

Amount of Each Disbursement this Period

330.66

IN-KIND: EVENT FACILITY RENTAL/CATERING

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

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

3297.68

418533.96



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. COFFMAN FOR CONGRESS 2016**

Mailing Address 4950 S YOSEMITE ST #511

City ENGLEWOOD State CO Zip Code 80111

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MICHAEL COFFMAN**

Office Sought:  House  
 Senate  
 President  
State: CO District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			11			2015			

Transaction ID : **SB23.I2581**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. COMSTOCK FOR CONGRESS**

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**BARBARA J COMSTOCK**

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			18			2015			

Transaction ID : **SB23.I2702**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. CRESENT HARDY FOR CONGRESS**

Mailing Address PO BOX 753941

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**CRESENT HARDY**

Office Sought:  House  
 Senate  
 President  
State: NV District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			11			2015			

Transaction ID : **SB23.I2569**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

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

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

1	5	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. DENHAM FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DR #150

City State Zip Code  
SACRAMENTO CA 95833

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JEFF DENHAM**

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	5

Transaction ID : **SB23.I2704**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. DOLD FOR CONGRESS**

Mailing Address PO BOX 8145

City State Zip Code  
NORTHFIELD IL 60093

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ROBERT JAMES DOLD JR**

Office Sought:  House  
 Senate  
 President  
State: IL District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

Transaction ID : **SB23.I2567**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. DONOVAN FOR CONGRESS**

Mailing Address 440 LEVERETT AVE

City State Zip Code  
STATEN ISLAND NY 10308

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DAN DONOVAN**

Office Sought:  House  
 Senate  
 President  
State: NY District: 11

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
SPECIAL

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

Transaction ID : **SB23.I2580**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. DUFFY FOR CONGRESS**

Mailing Address P.O. BOX 186

City ASHLAND State WI Zip Code 54806

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**SEAN P DUFFY**

Office Sought:  House  
 Senate  
 President  
State: WI District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : **SB23.I2716**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**B. ELISE FOR CONGRESS**

Mailing Address PO BOX 338

City WILLSBORO State NY Zip Code 12996

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ELISE M STEFANIK**

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2015

Transaction ID : **SB23.I2576**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**C. ELISE FOR CONGRESS**

Mailing Address PO BOX 338

City WILLSBORO State NY Zip Code 12996

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ELISE M STEFANIK**

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

Transaction ID : **SB23.I2706**

Amount of Each Disbursement this Period

5,000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF FRANK GUINTA**

Mailing Address P.O. BOX 877

City MANCHESTER State NH Zip Code 31050

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**FRANK GUINTA**

Office Sought:  House  
 Senate  
 President  
State: NH District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

**Transaction ID : SB23.I2568**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. FRIENDS OF MIA LOVE**

Mailing Address 913 WEST GROUSE CIRCLE

City SARATOGA SPRINGS State UT Zip Code 84045

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MIA LOVE**

Office Sought:  House  
 Senate  
 President  
State: UT District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	5

**Transaction ID : SB23.I2577**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF TODD YOUNG**

Mailing Address P.O. BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**TODD CHRISTOPHER YOUNG**

Office Sought:  House  
 Senate  
 President  
State: IN District: 09

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

**Transaction ID : SB23.I2718**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. GLENN GROTHMAN FOR CONGRESS**

Mailing Address PO BOX 1215

City FOND DU LAC State WI Zip Code 54964

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**GLENN S GROTHMAN**

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2015

Transaction ID : **SB23.I2589**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. GLENN GROTHMAN FOR CONGRESS**

Mailing Address PO BOX 1215

City FOND DU LAC State WI Zip Code 54964

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**GLENN S GROTHMAN**

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 22 / 2015

Transaction ID : **SB23.I2719**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. HURD FOR CONGRESS**

Mailing Address PO BOX 656

City HELOTES State TX Zip Code 78023

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**WILLIAM HURD**

Office Sought:  House  
 Senate  
 President  
State: TX District: 23

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : **SB23.I2570**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. KATKO FOR CONGRESS**

Mailing Address 5407 ANVIL DRIVE

City CAMILLUS State NY Zip Code 13031

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JOHN M KATKO**

Office Sought:  House  
 Senate  
 President  
State: NY District: 24

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : **SB23.I2571**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. KELLY FOR CONGRESS**

Mailing Address 5221-A CLIFF GOOKIN BLVD.

City TUPELO State MS Zip Code 38801

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JOHN TRENT KELLY**

Office Sought:  House  
 Senate  
 President  
State: MS District: 01

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
SPECIAL RUNOFF

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015

Transaction ID : **SB23.I2710**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. LAHOOD FOR CONGRESS**

Mailing Address PO BOX 10735

City PEORIA State IL Zip Code 61612

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DARIN MCKAY LAHOOD**

Office Sought:  House  
 Senate  
 President  
State: IL District: 18

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
SPECIAL PRIMARY

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015

Transaction ID : **SB23.I2711**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00



**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MIKE BOST FOR CONGRESS**

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MICHAEL J BOST**

Office Sought:  House  
 Senate  
 President  
State: IL District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	5		

Transaction ID : **SB23.I2714**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MOONEY FOR CONGRESS**

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ALEXANDER XAVIER MOONEY**

Office Sought:  House  
 Senate  
 President  
State: WV District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	5		

Transaction ID : **SB23.I2709**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. POLIQUIN FOR CONGRESS**

Mailing Address PO BOX 50

City OAKLAND State ME Zip Code 04963

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**BRUCE L POLIQUIN**

Office Sought:  House  
 Senate  
 President  
State: ME District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	5		

Transaction ID : **SB23.I2573**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

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

1	5	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. RIBBLE FOR CONGRESS**

Mailing Address P.O. BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**REID RIBBLE**

Office Sought:  House  
 Senate  
 President  
State: WI District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	1	5

Transaction ID : **SB23.I2477**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. RIBBLE FOR CONGRESS**

Mailing Address P.O. BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**REID RIBBLE**

Office Sought:  House  
 Senate  
 President  
State: WI District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : **SB23.I2717**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**RODNEY DAVIS**

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	5

Transaction ID : **SB23.I2708**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	0	0	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. RON JOHNSON FOR SENATE**

Mailing Address 219 E WASHINGTON AVE STE 101

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**RONALD HAROLD JOHNSON**

Office Sought:  House  
 Senate  
 President  
State: WI District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

**Transaction ID : SB23.I2579**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. RON JOHNSON FOR SENATE**

Mailing Address 219 E WASHINGTON AVE STE 101

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**RONALD HAROLD JOHNSON**

Office Sought:  House  
 Senate  
 President  
State: WI District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB23.I2715**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. RYAN COSTELLO FOR CONGRESS**

Mailing Address PO BOX 3154

City WEST CHESTER State PA Zip Code 19381

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**RYAN A COSTELLO**

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015

**Transaction ID : SB23.I2703**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. STEVE KNIGHT FOR CONGRESS**

Mailing Address PO BOX 984

City WILLOWS State CA Zip Code 95988

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**STEVE KNIGHT**

Office Sought:  House  
 Senate  
 President  
State: CA District: 25

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015

Transaction ID : **SB23.I2705**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. VALADAO FOR CONGRESS**

Mailing Address 504 VAN NESS AVE

City FRESNO State CA Zip Code 93721

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DAVID VALADAO**

Office Sought:  House  
 Senate  
 President  
State: CA District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : **SB23.I2780**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362

City JACKSON State MI Zip Code 49204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**TIMOTHY L WALBERG**

Office Sought:  House  
 Senate  
 President  
State: MI District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015

Transaction ID : **SB23.I2707**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. YOUNG FOR IOWA**

Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DAVID YOUNG**

Office Sought:  House  
 Senate  
 President  
State: IA District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : **SB23.I2574**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. ZELDIN FOR CONGRESS**

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**LEE M ZELDIN**

Office Sought:  House  
 Senate  
 President  
State: NY District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2015

Transaction ID : **SB23.I2575**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 26 / 2015

Transaction ID : **SB23.I2499**

Amount of Each Disbursement this Period

15000.00

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

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

25000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF WISCONSIN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2015

Mailing Address 148 E. JOHNSON STREET

**Transaction ID : SB23.I2587**

City MADISON State WI Zip Code 53703

Amount of Each Disbursement this Period

5,000.00
----------

Purpose of Disbursement  
CONTRIBUTION

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. ALPINE GROUP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Mailing Address 660 PENNSYLVANIA AVE SE STE. 201

**Transaction ID : SB23.I2641**

City D.C. State DC Zip Code 20003

Amount of Each Disbursement this Period

125.00
--------

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. GEORGE HOLDING FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Mailing Address PO BOX 97187

**Transaction ID : SB23.I2654**

City RALEIGH State NC Zip Code 27624

Amount of Each Disbursement this Period

125.00
--------

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NC District: 13

**[MEMO ITEM]**

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

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

5125.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. ALPINE GROUP**

Mailing Address 660 PENNSYLVANIA AVE SE STE. 201

City State Zip Code  
D.C. DC 20003

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2737**

Amount of Each Disbursement this Period

1	2	5	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. PAT MEEHAN FOR CONGRESS**

Mailing Address 5035 TOWNSHIP LINE ROAD  
P.O. BOX 308

City State Zip Code  
DREXEL HILL PA 19026

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name

**PATRICK L MEEHAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2738**

Amount of Each Disbursement this Period

1	2	5	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. BON VIVANT CATERING**

Mailing Address 2016 MT VERNON AVE

City State Zip Code  
ALEXANDRIA VA 22301

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2741**

Amount of Each Disbursement this Period

2	3	9	2	.5	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2	5	1	7	.5	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. PAT MEEHAN FOR CONGRESS**

Mailing Address 5035 TOWNSHIP LINE ROAD  
P.O. BOX 308

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name  
**PATRICK L MEEHAN**

Office Sought:  House  
 Senate  
 President  
State: PA District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	5		

Transaction ID : **SB23.I2742**

Amount of Each Disbursement this Period

2	3	9	2	.	5	0
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. BON VIVANT CATERING**

Mailing Address 2016 MT VERNON AVE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	5		

Transaction ID : **SB23.I2762**

Amount of Each Disbursement this Period

2	3	8	7	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. GEORGE HOLDING FOR CONGRESS**

Mailing Address PO BOX 97187

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name  
**MR. GEORGE E.B. HOLDING**

Office Sought:  House  
 Senate  
 President  
State: NC District: 13

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	5		

Transaction ID : **SB23.I2763**

Amount of Each Disbursement this Period

2	3	8	7	.	0	0
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[MEMO ITEM]

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

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

2	3	8	7	.	0	0
---	---	---	---	---	---	---

2	3	8	7	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. HONEYWELL INTERNATIONAL INC.**

Mailing Address 101 CONSTITUTION AVE NW STE. 500

City State Zip Code  
D.C. DC 20001

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	10	/	2015

Transaction ID : **SB23.I2595**

Amount of Each Disbursement this Period

300.00
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

City State Zip Code  
CAPE GIRARDEAU MO 63702

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name

**JASON SMITH**

Office Sought:  House  
 Senate  
 President  
State: MO District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	10	/	2015

Transaction ID : **SB23.I2638**

Amount of Each Disbursement this Period

300.00
--------

Category/  
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HONEYWELL INTERNATIONAL INC.**

Mailing Address 101 CONSTITUTION AVE NW STE. 500

City State Zip Code  
D.C. DC 20001

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : **SB23.I2783**

Amount of Each Disbursement this Period

300.00
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Category/  
Type

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

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

600.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. KRISTI FOR CONGRESS**

Mailing Address P.O. BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement  
IN-KIND: EVENT FACILITY RENTAL

Candidate Name  
**KRISTI LYNN NOEM**

Office Sought:  House  
 Senate  
 President  
State: SD District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : **SB23.I2784**

Amount of Each Disbursement this Period

300.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LAVAGNA**

Mailing Address 539 8TH ST SE

City D.C. State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : **SB23.I2739**

Amount of Each Disbursement this Period

4654.32
---------

Full Name (Last, First, Middle Initial)

**C. TOM REED FOR CONGRESS**

Mailing Address PO BOX 450

City VICTOR State NY Zip Code 14564

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name  
**THOMAS W REED II**

Office Sought:  House  
 Senate  
 President  
State: NY District: 29

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : **SB23.I2740**

Amount of Each Disbursement this Period

4654.32
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[MEMO ITEM]

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

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

4654.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. OCCASIONS CATERING**

Mailing Address 655 TAYLOR ST NE

City State Zip Code  
D.C. DC 20017

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	5

Transaction ID : **SB23.I2760**

Amount of Each Disbursement this Period

3	8	8	7	.	4	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

City State Zip Code  
CAPE GIRARDEAU MO 63702

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

**JASON SMITH**

Office Sought:  House  
 Senate  
 President  
State: MO District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	5

Transaction ID : **SB23.I2761**

Amount of Each Disbursement this Period

3	8	8	7	.	4	0
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	5

Transaction ID : **SB23.I2658**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4	3	8	7	.	4	0
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3	8	8	7	.	4	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

City CAPE GIRARDEAU State MO Zip Code 63702

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name  
**JASON SMITH**

Office Sought:  House  
 Senate  
 President  
State: MO District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	5

Transaction ID : **SB23.I2659**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2727**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. KRISTI FOR CONGRESS**

Mailing Address P.O. BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name  
**KRISTI LYNN NOEM**

Office Sought:  House  
 Senate  
 President  
State: SD District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2728**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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[MEMO ITEM]

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

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

5	0	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2729**

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. TOM REED FOR CONGRESS**

Mailing Address PO BOX 450

City VICTOR State NY Zip Code 14564

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

**THOMAS W REED II**

Office Sought:  House  Senate  President  
State: NY District: 29

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2730**

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2731**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

8	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
IN-KIND: FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB23.I2758**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

City CAPE GIRARDEAU State MO Zip Code 63702

Purpose of Disbursement  
IN-KIND:FUNDRAISING CONSULTING

Candidate Name

**JASON SMITH**

Office Sought:  House  Senate  President  
State: MO District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Transaction ID : **SB23.I2759**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WINDOWS CATERING**

Mailing Address 5724 GENERAL WASHINGTON DR

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2015

Transaction ID : **SB23.I2781**

Amount of Each Disbursement this Period

3509.14

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

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

4009.14

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. KRISTI FOR CONGRESS**

Mailing Address P.O. BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement  
IN-KIND: EVENT CATERING

Candidate Name  
**KRISTI LYNN NOEM**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: SD District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : **SB23.I2782**

Amount of Each Disbursement this Period

3	5	0	9	.	1	4
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	5

Transaction ID : **SB23.I2500**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION-BUILDING FUND

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	5

Transaction ID : **SB23.I2501**

Amount of Each Disbursement this Period

4	5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6	0	0	0	.	0	0
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2	8	2	9	8	0	.	3	6
---	---	---	---	---	---	---	---	---

**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

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. DANIEL FINNANE**

Mailing Address 46300 AMETHYST DR

City INDIAN WELLS State CA Zip Code 92210

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2015

**Transaction ID : SB28A.I2747**

Amount of Each Disbursement this Period

250.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

250.00

250.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Prosperity Action Inc.**

Full Name (Last, First, Middle Initial)

**A. MOTHER EMANUEL HOPE FUND**

Mailing Address PO BOX 304

City CHARLESTON State SC Zip Code 29402

Purpose of Disbursement  
DONATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2015

**Transaction ID : SB29.I2713**

Amount of Each Disbursement this Period

1000.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00