

# 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.

YOPAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

MEIER, J.THOMAS, , ,

Type or Print Name of Treasurer

Signature of Treasurer MEIER, J.THOMAS, , , [Electronically Filed] Date  /  /

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

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**YOPAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="96516.87"/>	<input type="text" value="96516.87"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="93244.51"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="76270.00"/>	<input type="text" value="96279.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="169514.51"/>	<input type="text" value="192796.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="34551.52"/>	<input type="text" value="57833.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="134962.99"/>	<input type="text" value="134962.99"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**YOPAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12250.00	22250.00
(ii) Unitemized .....	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12400.00	22400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	63000.00	63250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	75400.00	85650.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	9759.62
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).....	420.00	420.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	450.00	450.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	76270.00	96279.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	76270.00	96279.62

**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 .....	18301.52	33083.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18301.52	33083.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	19500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4750.00	5250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34551.52	57833.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34551.52	57833.50

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	75400.00	85650.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75400.00	85650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18301.52	33083.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	420.00	420.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17881.52	32663.50

**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 6 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Dole, Robert, , Hon.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 New Hampshire Ave NW

City Washington	State DC	Zip Code 20037
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) US Senator
--	---

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	/	2016

**Transaction ID : SA11AI.5507**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

Mailing Address 770 P Street NW  
Apt. 328

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Chamberhill Strategies	Occupation (for Individual) 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
06	/	26	/	2016

**Transaction ID : SA11AI.5504**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**C. Milne, John D., , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409 G St, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer (for Individual) mCapitol Management	Occupation (for Individual) Senior Vice President
--	--

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
06	/	26	/	2016

**Transaction ID : SA11AI.5515**

Amount of Each Receipt this Period  
500.00

Memo Item 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: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Park, Phil, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2016
Mailing Address 101 Constitution Ave NW Suite 400W		<b>Transaction ID : SA11AI.5509</b>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Altria	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Parker, Alexandra, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 16 / 2016
Mailing Address 314 Lytton Avenue Suite 200		<b>Transaction ID : SA11AI.5493</b>
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Artist	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Parker, Sean, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 16 / 2016
Mailing Address 314 Lytton Avenue Suite 200		<b>Transaction ID : SA11AI.5443</b>
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Apercen Partners	Occupation (for Individual) Executive	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
<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

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)  
**YOPAC**

**A. AMAZON CORPORATE LLC SEPARATE SEGREGATED FUND (AMAZON PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 601 NEW JERSEY AVE NW - SUITE 900

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

FEC ID number of contributing federal political committee. **C** C00360354

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 26 / 2016  
**Transaction ID : SA11C.5500**  
 Amount of Each Receipt this Period: 2500.00  
 Memo Item Contribution

**B. AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 401 N. LINDBERGH BLVD

City ST. LOUIS	State MO	Zip Code 63141
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00293910

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 26 / 2016  
**Transaction ID : SA11C.5511**  
 Amount of Each Receipt this Period: 5000.00  
 Memo Item Contribution

**C. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1111 14TH STREET, NW SUITE 1100

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 26 / 2016  
**Transaction ID : SA11C.5523**  
 Amount of Each Receipt this Period: 1000.00  
 Memo Item 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 9 OF 24
<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

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)  
**YOPAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1  
220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2016

**Transaction ID : SA11C.5445**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1061 AMERICAN LN

City PARK RIDGE State IL Zip Code 60173

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2016

**Transaction ID : SA11C.5524**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE, SUITE 950  
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2016

**Transaction ID : SA11C.5457**

Amount of Each Receipt this Period  
5000.00

Memo Item 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: PAGE 10 OF 24  
(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)  
**YOPAC**

**A. CME GROUP INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SOUTH WACKER DRIVE  
 City CHICAGO State IL Zip Code 60606  
 FEC ID number of contributing federal political committee. **C** C00076299  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 2016  
**Transaction ID : SA11C.5506**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Contribution

**B. CONSUMER TECHNOLOGY ASSOCIATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 SOUTH EADS STREET  
 City ARLINGTON State VA Zip Code 22202  
 FEC ID number of contributing federal political committee. **C** C00375048  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 2016  
**Transaction ID : SA11C.5497**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Contribution

**C. CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 F STREET, NW SUITE 450  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00111559  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 31 / 2016  
**Transaction ID : SA11C.5454**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
<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

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)  
**YOPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 365

City WASHINGTON	State DC	Zip Code 20044
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer (for Individual) Occupation (for Individual)

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		16		2016

**Transaction ID : SA11C.5456**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer (for Individual) Occupation (for Individual)

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		2016

**Transaction ID : SA11C.5512**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FRIENDS OF MEDICAL RESEARCH POLITICAL ACTION COMMITTEE**

Mailing Address 300 INDEPENDENCE AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00566042

Name of Employer (for Individual) Occupation (for Individual)

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		2016

**Transaction ID : SA11C.5518**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 12 OF 24
<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

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)  
**YOPAC**

**A. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 MASSACHUSETTS AVENUE, NW  
 SUITE 400  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00076810  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **MM / DD / YYYY**  
 05 / 31 / 2016  
**Transaction ID : SA11C.5431**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 CONSTITUTION AVE. NW  
 SUITE 500 WEST  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00096156  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **MM / DD / YYYY**  
 04 / 26 / 2016  
**Transaction ID : SA11C.5430**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1015 FIFTEENTH STREET NW  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00034272  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **MM / DD / YYYY**  
 06 / 16 / 2016  
**Transaction ID : SA11C.5442**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<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 13 OF 24
<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

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)  
**YOPAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL CONFECTIONERS ASSOCIATION OF THE UNITED STATES, INC. POLITICAL ACTION COMMITTEE (

Mailing Address 1101 30TH STREET NW, SUITE 200

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00003855

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

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	/	2016

**Transaction ID : SA11C.5502**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

Mailing Address 4615 N LEWIS AVE

City SIOUX FALLS	State SD	Zip Code 57104
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450692

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

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	/	16	/	2016

**Transaction ID : SA11C.5441**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

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

Mailing Address 600 13TH STREET, NW  
SUITE 1000

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107235

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

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	/	16	/	2016

**Transaction ID : SA11C.5455**

Amount of Each Receipt this Period  
2500.00

Memo Item 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: PAGE 14 OF 24  
(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)  
**YOPAC**

**A. PRINTING INDUSTRIES OF AMERICA PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 G STREET NW  
 SUITE 800  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00018028  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2016  
**Transaction ID : SA11C.5440**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**B. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 WILSON BLVD  
 SUITE 1500  
 City ARLINGTON State VA Zip Code 22209  
 FEC ID number of contributing federal political committee. **C** C00097568  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2016  
**Transaction ID : SA11C.5446**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. THERMO FISHER SCIENTIFIC INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81 WYMAN STREET  
 PO BOX 9046  
 City WALTHAM State MA Zip Code 02454  
 FEC ID number of contributing federal political committee. **C** C00292318  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 26 / 2016  
**Transaction ID : SA11C.5520**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	63000.00

**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 24  
(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)  
**YOPAC**

**A. Cairo Wine & Liquor**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1618 17th St NW  
 City Washington State DC Zip Code 20009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2016  
**Transaction ID : SA15.5530**  
 Amount of Each Receipt this Period  
 420.00  
 Memo Item  
 Vendor Refund

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	420.00
<b>TOTAL</b> This Period (last page this line number only).....	420.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 24
<input 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 checked="" 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)  
**YOPAC**

**A. Bollier for State Representative**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6910 Overhill Dr

City Mission Hills	State KS	Zip Code 66208
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		16		2016

**Transaction ID : SA17.5447**

Amount of Each Receipt this Period  
250.00

Memo Item  
Refund of Non-Federal Contribution

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Cairo Wine &amp; Liquor</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016	
Mailing Address 1618 17th St NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5413</b> Amount of Each Disbursement this Period [ ] 3655.98	
City Washington	State DC	Zip Code 20009	Category/ Type [ ]
Purpose of Disbursement PAC Event Expense: Beverages		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cairo Wine &amp; Liquor</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2016	
Mailing Address 1618 17th St NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5416</b> Amount of Each Disbursement this Period [ ] 1024.46	
City Washington	State DC	Zip Code 20009	Category/ Type [ ]
Purpose of Disbursement PAC Event Expense: Beverages		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. District Taco LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016	
Mailing Address 1919 M St NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5412</b> Amount of Each Disbursement this Period [ ] 1496.88	
City Washington	State DC	Zip Code 20036	Category/ Type [ ]
Purpose of Disbursement PAC Event Expense: Food & Beverage		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 6177.32
<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"/> 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)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Gustafson, Gretchen, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016	
Mailing Address 416 Burbank Street SE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5487</b> Amount of Each Disbursement this Period 8625.00	
City Washington	State DC	Zip Code 20019	Category/ Type
Purpose of Disbursement PAC Event Expense: Entertainment			
Candidate Name		Memo Item <input type="checkbox"/>	
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Kansas City Kansas Chamber of Commerce</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2016	
Mailing Address 727 Minnesota Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5483</b> Amount of Each Disbursement this Period 855.50	
City Kansas City	State KS	Zip Code 66101	Category/ Type
Purpose of Disbursement PAC Event Expense: Forum/BBQ			
Candidate Name		Memo Item <input type="checkbox"/>	
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Landini Brothers</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016	
Mailing Address 115 King St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5406</b> Amount of Each Disbursement this Period 2193.06	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement PAC Event Expense: Food & Beverage			
Candidate Name		Memo Item <input type="checkbox"/>	
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) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11673.56
<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"/> 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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. Landini Brothers**

Mailing Address 115 King St

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
PAC Event Expense: Food & Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	9							

FEC Identification Number

C [ ]

**Transaction ID : SB21B.5407**

Amount of Each Disbursement this Period

[ ] 90.79

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 90.79

[ ] 17941.67

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**YOPAC**

**A. DREW FERGUSON FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
06 / 20 / 2016

Mailing Address PO BOX 387

City WEST POINT State GA Zip Code 31833

Purpose of Disbursement Contribution

Candidate Name **FERGUSON, ANDERSON DREW, , , IV**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: GA District: 03

FEC Identification Number: **C00607838**  
Transaction ID : **SB23.5680**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. FRIENDS OF ERIK PAULSEN**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
06 / 09 / 2016

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement Contribution

Candidate Name **PAULSEN, ERIK, , ,**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: MN District: 03

FEC Identification Number: **C00439661**  
Transaction ID : **SB23.5463**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. FRIENDS OF FRANK GUINTA**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
06 / 09 / 2016

Mailing Address P.O. BOX 877

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement Contribution

Candidate Name **GUINTA, FRANK, , ,**

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NH District: 01

FEC Identification Number: **C00461350**  
Transaction ID : **SB23.5458**  
Amount of Each Disbursement this Period: 4000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6000.00

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

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)  
**YOPAC**

**A. LOUDERMILK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 447

M M M	/	D D D	/	Y Y Y Y Y
04		29		2016

City CASSVILLE State GA Zip Code 30123

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00543892
---	-----------

Candidate Name  
**LOUDERMILK, BARRY, , ,**

Category/  
Type

**Transaction ID : SB23.5423**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: GA District: 11

1000.00
---------

Memo Item

**B. MCSALLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 18612

M M M	/	D D D	/	Y Y Y Y Y
06		28		2016

City TUCSON State AZ Zip Code 85731

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00512236
---	-----------

Candidate Name  
**MCSALLY, MARTHA E., , ,**

Category/  
Type

**Transaction ID : SB23.5528**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: AZ District: 02

1000.00
---------

Memo Item

**C. TOM REED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 10847

M M M	/	D D D	/	Y Y Y Y Y
06		21		2016

City ROCHESTER State NY Zip Code 14610

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00464032
---	-----------

Candidate Name  
**REED, THOMAS W., , ,**

Category/  
Type

**Transaction ID : SB23.5472**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 23

1000.00
---------

Memo Item

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

3000.00
---------

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

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)  
**YOPAC**

**A. TREY GOWDY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3324

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2016

City SPARTANBURG State SC Zip Code 29304

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00462523
---	-----------

Candidate Name  
**GOWDY, TREY, , ,**

Category/  
Type

**Transaction ID : SB23.5467**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: SC District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

2500.00
---------

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

--

Memo Item

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

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

2500.00
---------

11500.00
----------

**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"/> 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

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)  
**YOPAC**

**A. Gardner Edgerton Republican Party**

Full Name (Last, First, Middle Initial)

Mailing Address 121 Colleen Ct

City Gardner State KS Zip Code 66030

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2016

FEC Identification Number: C

Transaction ID : SB29.5485

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Kelsey Smith Foundation Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 8605 Robinson St

City Shawnee Mission State KS Zip Code 66212

Purpose of Disbursement Charitable Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2016

FEC Identification Number: C

Transaction ID : SB29.5533

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. KU Endowment**

Full Name (Last, First, Middle Initial)

Mailing Address 1891 Constant Ave

City Lawrence State KS Zip Code 66047

Purpose of Disbursement Charitable Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 10 / 2016

FEC Identification Number: C

Transaction ID : SB29.5417

Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3750.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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)  
**YOPAC**

Full Name (Last, First, Middle Initial)

**A. Leadership Kansas**

Mailing Address 835 SW Topeka Boulevard

City  
Topeka

State  
KS

Zip Code  
66612

Purpose of Disbursement  
Charitable Donation

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.5544**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Northwest Johnson County Republicans**

Mailing Address 21704 West 57th Terrace

City  
Shawnee

State  
KS

Zip Code  
66218

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.5481**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Olathe Republican Central Committee**

Mailing Address 1460 S Apache Ln

City  
Olathe

State  
KS

Zip Code  
66062

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.5531**

Amount of Each Disbursement this Period

Memo Item

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

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