

**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

American Political Action Committee

ADDRESS (number and street)

P.O. Box 1682

☐ Check if different than previously reported. (ACC)

Bellevue

WA

98009

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C99002396

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y 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 Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 J.H. Versnel

Signature of Treasurer

J.H. Versnel

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		589869.15
(b) Cash on Hand at Beginning of Reporting Period.....	531069.18	
(c) Total Receipts (from Line 19)	5398.79	22267.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	536467.97	612137.07
7. Total Disbursements (from Line 31)	6896.97	82566.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	529571.00	529571.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

American Political Action Committee

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

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).....

417.00

1643.00

(ii) Unitemized

4952.02

20550.02

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5369.02

22193.02

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

5369.02

22193.02

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

29.77

74.90

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))..... ▶

5398.79

22267.92

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

5398.79

22267.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4951.82	13601.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4951.82	13601.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1945.15	68964.80
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	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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6896.97	82566.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6896.97	82566.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5369.02	22193.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5369.02	22193.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4951.82	13601.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	4951.82	13601.27

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 18

(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)

American Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jo Ann Baughman

Mailing Address PO Box 1269

City
Philomath

State Zip Code
OR 97370

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : SA11AI.80016

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

B. Jo Ann Baughman

Mailing Address PO Box 1269

City
Philomath

State Zip Code
OR 97370

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : SA11AI.80057

Amount of Each Receipt this Period

29.00

Full Name (Last, First, Middle Initial)

C. Jo Ann Baughman

Mailing Address PO Box 1269

City
Philomath

State Zip Code
OR 97370

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : SA11AI.80074

Amount of Each Receipt this Period

69.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

127.00

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 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joyce Solberg

Mailing Address 204 warwick rd

City State Zip Code
 tower lakes IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 26 2015

Transaction ID : SA11AI.80116

Amount of Each Receipt this Period

290.00

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

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

SUBTOTAL of Receipts This Page (optional)..... ►

290.00

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

417.00

<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

American Political Action Committee

A. Autobottly

Date of Disbursement

Mailing Address 333 South State St.

City	State	Zip Code
Lake Oswego	OR	97034

Transaction ID : SB21B.80100

Purpose of Disbursement	Non-Candidate Issue Fax Broadcasting
-------------------------	--------------------------------------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Autobottly

Date of Disbursement

Mailing Address 333 South State St.

City	State	Zip Code
Lake Oswego	OR	97034

Transaction ID : SB21B.80172

Purpose of Disbursement	Non-Candidate Issue Broadcast Faxing
-------------------------	--------------------------------------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

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)

C. Autobottly

Date of Disbursement

Mailing Address 333 South State St.

Three digital displays showing the date 11/04/2015 in MM/DD/YYYY format. The first display shows '11' with 'M' labels above. The second shows '04' with 'D' labels above. The third shows '2015' with 'Y' labels above.

City	State	Zip Code
Lake Aswego	OR	97034

Transaction ID : SB21B.80177

Purpose of Disbursement	Non-Candidate Issue Broadcast Faxing
-------------------------	--------------------------------------

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

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:

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

343.38

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 53150

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Bank 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 Y
11 / 16 / 2015
Transaction ID : SB21B.80237

Amount of Each Disbursement this Period

18.80

Full Name (Last, First, Middle Initial)

B. Freedom Donations

Mailing Address 4850 Wright Road

City Stafford State TX Zip Code 77477

Purpose of Disbursement
Credit Card Processing 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 Y
07 / 07 / 2015
Transaction ID : SB21B.80099

Amount of Each Disbursement this Period

98.61

Full Name (Last, First, Middle Initial)

C. Freedom Donations

Mailing Address 4850 Wright Road

City Stafford State TX Zip Code 77477

Purpose of Disbursement
Credit Card Processing 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 Y
07 / 17 / 2015
Transaction ID : SB21B.80104

Amount of Each Disbursement this Period

91.99

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

209.40

<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

American Political Action Committee

A. Freedom Donations

Category/
Type

27.20

State: District:

B. Freedom Donations

M M / D D / Y Y Y Y
08 20 2015

Category/
Type

34.46

State: District:

C. Freedom Donations

Category/
Type

6.19

State: District:

67.85

<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

American Political Action Committee

A. Freedom Donations

Category/
Type

40.44

State: District:

B. Freedom Donations

Category/
Type

25.06

State: District:

C. Freedom Donations

Category/
Type

18.58

State: District:

Category	Percentage
Students who did not pass the exam	84.08

<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

American Political Action Committee

A. Freedom Donations

State: District:

B. Freedom Donations

M M / D D / Y Y Y Y
12 02 2015

State: District:

Age Group	Percentage
18-24	100%
25-34	100%
35-44	100%
45-54	100%
55-64	100%
65-74	6.76%
75+	0%

C. Freedom Donations

State: District:

29.83

Percentage of students who did not pass the exam
40.43

<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

American Political Action Committee

<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

American Political Action Committee

225.00

375.00

<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

American Political Action Committee

A. Ernie Skip Simmons

Mailing Address

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

Purpose of Disbursement	Non-Candidate Issue Copyrighting
-------------------------	----------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Three 7-segment displays are shown, each with a different color (blue, green, red) and a different font (serif, sans-serif, and a mix). The first display shows '11', the second shows '04', and the third shows '2015'. They are separated by slashes.

Transaction ID : SB21B.80178

Amount of Each Disbursement this Period

225.00

B. Ernie Skip Simmons

Mailing Address

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

Purpose of Disbursement
Non-Candidate Email Issue Copyrighting

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
12 02 2015

Transaction ID : SB21B.80230

Amount of Each Disbursement this Period

450.00

C. Rebecca Woodhouse

Mailing Address 1126 Church Street

City	State	Zip Code
Lebanon	PA	17046

Purpose of Disbursement	Non-Candidate Issue Email Coding
<p>1. Administrative</p> <p>2. Constitutional</p> <p>3. Education</p> <p>4. Environment</p> <p>5. Health</p> <p>6. Infrastructure</p> <p>7. International</p> <p>8. Justice</p> <p>9. Law</p> <p>10. Local Government</p> <p>11. Media</p> <p>12. Non-Profit</p> <p>13. Other</p> <p>14. Religion</p> <p>15. Science</p> <p>16. Social Services</p> <p>17. Terrorism</p> <p>18. Transportation</p> <p>19. Utilities</p> <p>20. War</p> <p>21. Work</p> <p>22. Welfare</p> <p>23. Other</p>	<p>1. Administrative</p> <p>2. Constitutional</p> <p>3. Education</p> <p>4. Environment</p> <p>5. Health</p> <p>6. Infrastructure</p> <p>7. International</p> <p>8. Justice</p> <p>9. Law</p> <p>10. Local Government</p> <p>11. Media</p> <p>12. Non-Profit</p> <p>13. Other</p> <p>14. Religion</p> <p>15. Science</p> <p>16. Social Services</p> <p>17. Terrorism</p> <p>18. Transportation</p> <p>19. Utilities</p> <p>20. War</p> <p>21. Work</p> <p>22. Welfare</p> <p>23. Other</p>

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) ▼		

Date of Disbursement

Transaction ID : SB21B.80098

Amount of Each Disbursement this Period

250.00

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

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

925.00

<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

American Political Action Committee

A. Rebecca Woodhouse

Mailing Address

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

Purpose of Disbursement	Non-Candidate Issue Email Coding

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.80109

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	20.00
45-54	25.00
55-64	30.00
65-74	35.00
75-84	40.00
85+	70.00

Full Name (Last, First, Middle Initial)

B. Rebecca Woodhouse

Mailing Address

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

Purpose of Disbursement	Non-Candidate Issue Email Coding
<p> <input type="checkbox"/> </p>	<p> <input type="checkbox"/> </p>

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.80113

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	100
25-34	100
35-44	100
45-54	100
55-64	100
65-74	100
75-84	100
85+	130.00

Full Name (Last, First, Middle Initial)

C. Rebecca Woodhouse

Mailing Address 1126 Church Street

City	State	Zip Code
Lebanon	PA	17046

Purpose of Disbursement Non-Candidate Issue Coding

Candidate Name _____

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.80174

Amount of Each Disbursement this Period

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

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

300.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rebecca Woodhouse

Mailing Address 1126 Church Street

City Lebanon State PA Zip Code 17046

Purpose of Disbursement
Non-Candidate Issue Email Coding

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 Y Y
11 / 11 / 2015
Transaction ID : SB21B.80228

Amount of Each Disbursement this Period

90.00

Full Name (Last, First, Middle Initial)

B. Rebecca Woodhouse

Mailing Address 1126 Church Street

City Lebanon State PA Zip Code 17046

Purpose of Disbursement
Non-Candidate Issue Email Coding

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 Y Y
12 / 02 / 2015
Transaction ID : SB21B.80231

Amount of Each Disbursement this Period

100.00

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) ▼

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)..... ►

190.00

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

4776.41

Full Name of Payee Campaign HQ		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 109 West Front St		Amount 195.15	
City Brooklyn	State IA	Zip Code 52211	Transaction ID : SE.80170
Purpose of Expenditure Telemarketing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		60195.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name of Payee Delta Defense LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2015	
Mailing Address 300 South 6th Avenue		Amount 1750.00	
City West Bend	State WI	Zip Code 53095	Transaction ID : SE.80233 Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2015
Purpose of Expenditure Radio Ads	Category/ Type 004		
Name of Federal Candidate Hilary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	61945.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1945.15
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	1945.15

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

Date _____

Signature