

# 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

MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1600 EYE STREET NW WASHINGTON DC 20006

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲ C C00139519 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2015 through 05 31 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 Anna Henderson

Signature of Treasurer Anna Henderson [Electronically Filed] Date 01 07 2016

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

Office Use Only table with 6 empty columns and 1 row

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

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"/>	<input type="text" value="16336.88"/>	<input type="text" value="16336.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48220.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1669.71"/>	<input type="text" value="47552.84"/>
(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="49889.72"/>	<input type="text" value="63889.72"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9508.06"/>	<input type="text" value="23508.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="40381.66"/>	<input type="text" value="40381.66"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

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).....	1582.71	20932.22
(ii) Unitemized .....	87.00	11620.62
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1669.71	32552.84
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1669.71	47552.84
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1669.71	47552.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1669.71	47552.84

**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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8508.06	22508.06
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000.00	1000.00
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9508.06	23508.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9508.06	23508.06

**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) .....	1669.71	47552.84
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	669.71	46552.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

**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 11
	<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)  
**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Anissa Brennan</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P128</b>
Mailing Address 1600 I Street NW			Amount of Each Receipt this Period 166.00
City Washington	State DC	Zip Code 20006	Payroll Deduction (\$166.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 664.00	
Name of Employer Motion Picture Association of America	Occupation Vice President, Trade Policy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Marilyn Gordon</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P138</b>
Mailing Address 5507 Fairgrange Dr			Amount of Each Receipt this Period 209.00
City Agoura Hills	State CA	Zip Code 91301	Payroll Deduction (\$209.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 209.00	
Name of Employer Motion Picture Assoc of Americ	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Kathy Grant</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P129</b>
Mailing Address 1600 Eye Street, NW			Amount of Each Receipt this Period 90.91
City Washington	State DC	Zip Code 20006	Payroll Deduction (\$90.91 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 363.64	
Name of Employer MPAA	Occupation Senior VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.91
<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 11
	<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)  
**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Patrick Kilcur</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P130</b>
Mailing Address 1534 8th Street NW			Amount of Each Receipt this Period 209.00
City Washington	State DC	Zip Code 20001	Payroll Deduction (\$209.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 836.00	
Name of Employer Motion Picture Association of America	Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dean Marks</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P135</b>
Mailing Address 3914 Kingswood Rd			Amount of Each Receipt this Period 417.00
City Sherman Oaks	State CA	Zip Code 91403	Payroll Deduction (\$417.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1668.00	
Name of Employer MPAA	Occupation EVP, Deputy General Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Orit Michiel</b>			Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P131</b>
Mailing Address 15301 Ventura Blvd Bldg E			Amount of Each Receipt this Period 100.00
City Sherman Oaks	State CA	Zip Code 91403-5885	Payroll Deduction (\$100.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00	
Name of Employer MPAA, Inc	Occupation Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	726.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<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)  
**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Greg Saphier</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P132</b>
Mailing Address 3210 Glenwood Place		Amount of Each Receipt this Period 181.80
City Falls Church	State VA	Zip Code 22041
FEC ID number of contributing federal political committee. C	Name of Employer Motino Picture Association of America	Occupation Director External Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 727.20	
		Payroll Deduction (\$181.80 Monthly)

Full Name (Last, First, Middle Initial) <b>B. Benjamin Staub</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P133</b>
Mailing Address 1600 I Street NW		Amount of Each Receipt this Period 84.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C	Name of Employer Motion Picture Association of America	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	
		Payroll Deduction (\$84.00 Monthly)

Full Name (Last, First, Middle Initial) <b>C. Karen Thorland</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : 766-P134</b>
Mailing Address 15301 Ventura Blvd Bldg E		Amount of Each Receipt this Period 125.00
City Sherman Oaks	State CA	Zip Code 91403-5885
FEC ID number of contributing federal political committee. C	Name of Employer MPAA, Inc	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Payroll Deduction (\$125.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.80
<b>TOTAL</b> This Period (last page this line number only).....▶	1582.71



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF SCHUMER (P)**

Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement contribution

011

Candidate Name

**CHARLES E SCHUMER**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NY District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2015

**Transaction ID : 768**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. LEAHY FOR U.S. SENATOR COMMITTEE (P)**

Mailing Address PO BOX 1042

City MONTPELIER State VT Zip Code 05601

Purpose of Disbursement contribution

011

Candidate Name

**PATRICK J LEAHY**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: VT District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2015

**Transaction ID : 770**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. PORTMAN FOR SENATE COMMITTEE (P)**

Mailing Address 9856 ARCHER LANE

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement contribution

011

Candidate Name

**ROB PORTMAN**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: OH District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : 772**

Amount of Each Disbursement this Period

3000.00

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

8000.00

**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"/> 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)  
**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

**A. The Peninsula**

Full Name (Last, First, Middle Initial)

Mailing Address 9882 South Santa Monica Boulevard

City Beverly Hills State CA Zip Code 90212

Purpose of Disbursement Breakfast for political event

Candidate Name **ROB PORTMAN**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: OH District: 00

Date of Disbursement: 05 / 29 / 2015

**Transaction ID : 771**

Amount of Each Disbursement this Period: 508.06

Category/Type: 011

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	508.06
<b>TOTAL</b> This Period (last page this line number only).....▶	8508.06

**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)  
**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. John A McCoskey**

Mailing Address 1600 I Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
contribution refunded

010

Candidate Name

**John A McCoskey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2015

**Transaction ID : 769**

Amount of Each Disbursement this Period

834.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Lauren A Reamy**

Mailing Address 6901 Cedarbrooke Court

City Falls Church State VA Zip Code 22042

Purpose of Disbursement  
contribution refunded

010

Candidate Name

**Lauren A Reamy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2015

**Transaction ID : 797**

Amount of Each Disbursement this Period

1000.00

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:

Date of Disbursement

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

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

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

1000.00

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

1000.00