

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
Ann PAC

ADDRESS (number and street) P.O. Box 3535
Ballwin MO 63022
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00531764 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

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 Patrick McSwain

Signature of Treasurer Patrick McSwain [Electronically Filed] Date 01 / 30 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Ann PAC

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="2014"/>	<input type="text" value="76446.94"/>	<input type="text" value="76446.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="28779.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8500.00"/>	<input type="text" value="159200.00"/>
(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="37279.48"/>	<input type="text" value="235646.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12682.16"/>	<input type="text" value="211049.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24597.32"/>	<input type="text" value="24597.32"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Ann PAC

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).....	0.00	44000.00
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	44200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	8500.00	115000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8500.00	159200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8500.00	159200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8500.00	159200.00

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	10182.16	83205.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10182.16	83205.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	122843.91
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(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	5000.00
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)) ..	12682.16	211049.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12682.16	211049.62

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)	8500.00	159200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8500.00	154200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10182.16	83205.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10182.16	83205.71

**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 13
<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)
Ann PAC

Full Name (Last, First, Middle Initial)
A. Investment Company Institute Political Action Committee

Mailing Address 1401 H Street NW
#1200

City Washington State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 02 / 2014
Transaction ID : AD8C67CB608D1435CBD6

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G St. NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
12 / 02 / 2014
Transaction ID : A64476D7FC4F447B8A85

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
c. The Capital Group Companies, Inc. PAC

Mailing Address 33 S. Hope Street

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 16 / 2014
Transaction ID : AE1821FCEA1CE4E3C956

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	8500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Database expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2014

Transaction ID : B330AD2B12E9946B6A39

Amount of Each Disbursement this Period

300.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Commerce Bank

Mailing Address PO Box 808009

City Kansas City State MO Zip Code 64180-8009

Purpose of Disbursement
Credit Card Payment: See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2014

Transaction ID : B1EA38069EABF4FFDA93

Amount of Each Disbursement this Period

3032.16

Category/
Type

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : B765928E45B65439A9A1

Amount of Each Disbursement this Period

75.00

Category/
Type

[MEMO ITEM]
Airline fee

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

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

3332.16

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : BA16C2C8727F74466AC5

Amount of Each Disbursement this Period

149.00

[MEMO ITEM]
Airline Flight

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : BDC4F9A13146F466FA10

Amount of Each Disbursement this Period

89.00

[MEMO ITEM]
Airline Flight

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : B4C1261AE66C249C5916

Amount of Each Disbursement this Period

567.00

[MEMO ITEM]
Airline Flight

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
flight credit

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2014			

Transaction ID : BFE9EABC194174089B8B

Amount of Each Disbursement this Period

									-89.00

[MEMO ITEM]
flight credit

Full Name (Last, First, Middle Initial)

B. Westin Kierland Resort

Mailing Address 6902 East Greenway Parkway

City Scottsdale State AZ Zip Code 85254-8123

Purpose of Disbursement
hotel stay/travel expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2014			

Transaction ID : B1649AE8D275F45D0925

Amount of Each Disbursement this Period

									656.54

[MEMO ITEM]
hotel stay/travel expenses

Full Name (Last, First, Middle Initial)

C. The Elms Hotel

Mailing Address 75 South Main Street

City Oxford State OH Zip Code 45056-1715

Purpose of Disbursement
hotel stay/travel expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2014			

Transaction ID : B2A005A12F0DB419AB22

Amount of Each Disbursement this Period

									587.66

[MEMO ITEM]
hotel stay/travel expenses

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

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

									0.00
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Airline fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2014			

Transaction ID : B78296D7FE2AD43818BF

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Airline fee

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : B3FD6E4F7A35E400F950

Amount of Each Disbursement this Period

165.10

[MEMO ITEM]
Airline Flight

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : B394D0974FC06489CBC9

Amount of Each Disbursement this Period

165.10

[MEMO ITEM]
Airline Flight

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2014

Transaction ID : BE669BA508E1F4E5D9B2

Amount of Each Disbursement this Period

266.10

[MEMO ITEM]
Airline Flight

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
Airline Flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2014

Transaction ID : B2938271BA0C04F99910

Amount of Each Disbursement this Period

266.10

[MEMO ITEM]
Airline Flight

Full Name (Last, First, Middle Initial)

C. Gula Graham Group

Mailing Address 499 S Capitol St SW
Ste 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement
Fundraising fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2014

Transaction ID : B13104BE3004449B2A59

Amount of Each Disbursement this Period

1500.00

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

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial) A. Gula Graham Group		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 499 S Capitol St SW Ste 420		Transaction ID : BAC2A64E424A54CC09EF
City Washington State DC Zip Code 20003-4027	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Fundraising fee	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) B. Gula Graham Group		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 499 S Capitol St SW Ste 420		Transaction ID : BE7D5F142D4234EA5B60
City Washington State DC Zip Code 20003-4027	Amount of Each Disbursement this Period 2350.00	
Purpose of Disbursement Fundraising fee	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. Gula Graham Group		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 499 S Capitol St SW Ste 420		Transaction ID : BE2FECFDDBD3F430AB54
City Washington State DC Zip Code 20003-4027	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Fundraising fee	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)..... ▶	5350.00
TOTAL This Period (last page this line number only)..... ▶	10182.16

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Bill Cassidy for Senate

Mailing Address PO BOX 80505

City State Zip Code
Baton Rouge LA 70898-0505

Purpose of Disbursement
Political Contribution: Runoff 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : B691D386B80D840E2B4D

Amount of Each Disbursement this Period

2500.00

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

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

2500.00

2500.00
