05-03-00048226

FEC FORM 3X

Office

Use

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2016 FEB -5 PH 12: 12

FEC FORM 3X

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. ISINPPORT AIND DEFEND PAC ADDRESS (number and street) Check if different than previously reported. (ACĆ) CITY A STATE A ZIP CODE A 2. FEC IDENTIFICATION NUMBER ▼ IS THIS NEW **AMENDED** C00.5.5.25.2 REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Aug 20 (M8) Feb 20 (M2) May 20 (M5) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) Primary (12P) Runoff (12R) 12-Day General (12G) July 15 **PRE-Election** Quarterly Report (Q2) Special (12S) Report for the: Convention (12C) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST**-Election General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 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. Type or Print Name of Treasurer Date Signature of Treasurer

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

SUMMARY PAGE

| FEC Form 3X (Rev. 02/2003) | FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS Page 2 | | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|---------------------------------------|--|--|
| Write or Type Committee Name | | | | |
| | Support and Def | rend PAC | | |
| Report Covering the Period: From: | 7 '81 '2015 TO | | | |
| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | |
| S. (a) Cash on Hand January 1, [2,0,1,5] | | 6,5 8.7.4.3 | | |
| (b) Cash on Hand at Beginning of Reporting Period | 6,04.4.96 | • | | |
| (c) Total Receipts (from Line 19) | 5,091.81 | [8,8,0,3,°°,4 | | |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 11,136,77 | ,/_5,3,9,0.~ | | |
| 7. Total Disbursements (from Line 31) | 6,483.57 | [| | |
| Reporting Period (subtract Line 7 from Line 6(d)) | 4,6,5,3,20 | 4,653.20 | | |
| Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | [| | | |
| This committee has qualified as a multic | candidate 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

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name and Support To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts Calendar Year-to-Date **Total This Period** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)..... (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| | II. Disbursements | COLUMN A | COLUMN B |
|-----|---------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------|
| 21. | Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | Total This Period | Calendar Year-to-Date |
| | (i) Federal Share | | |
| | (ii) Non-Federal Share | | |
| | (b) Other Federal Operating | | |
| | Expenditures | 39.235 | 8.2.3.7.5. |
| | (c) Total Operating Expenditures | | 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| | (add 21(a)(i), (a)(ii), and (b))▶ | 3,983.51 | 8,237.5/ |
| 22. | Transfers to Affiliated/Other Party | | |
| 23. | Contributions to | | |
| | Federal Candidates/Committees and Other Political Committees | 2,5,0,0.00 | 2,5.0.0.°° |
| 24. | Independent Expenditures | | |
| 25. | (use Schedule E) | | |
| | (use scredule F) | | |
| 26. | Loan Repayments Made | | |
| | | | |
| | Loans Made | | |
| 28. | Refunds of Contributions To: (a) Individuals/Persons Other | | |
| | Than Political Committees | | |
| | (h) Political Parts Committees | | |
| | (b) Political Party Committees | | |
| | (such as PACs) | | |
| | (555) | | |
| | (d) Total Contribution Refunds | | |
| | (add Lines 28(a), (b), and (c))▶ | | |
| | | | |
| 29. | Other Disbursements | | |
| 20 | Federal Election Activity (52 U.S.C. § 30101(| 30// | |
| 30. | (a) Allocated Federal Election Activity | 20)) | |
| | (from Schedule H6) | | |
| | (i) Federal Share | | |
| | | | |
| | (ii) "Levin" Share | | |
| | (b) Federal Election Activity Paid Entirely | | |
| | With Federal Funds | | |
| | (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | | |
| | 2.100 00(4)(1), 00(4)(1) 4.10 00(0)) | | |
| 31. | Total Disbursements (add Lines 21(c), 22, | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 6,48.3.57 | , 10,7,37.57 |
| 32. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) and Line 30(a)(ii) | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | |
| | from Line 31) | 6,4833 | 10.1373.1 |
| | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003

Page 5

| | 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) | 5,0,8,3,6,2 | 8,78362 |
| 34. | Total Contribution Refunds (from Line 28(d)) | | |
| | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5,083.62 | 8.7.83.62 |
| | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 3,983.57 | 8,23,757 |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 3,98357 | 8,2,3,7,5,7 |

| SCHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE OF | | |
|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------|--|--|
| ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the | (check only one) | | |
| | | Detailed Summary Page | 11a 11b 11c 12 | | |
| | | | 13 14 15 16 17 | | |
| | y information copied from such Reports and Statements for commercial purposes, other than using the name as | | | | |
| <u> </u> | NAME OF COMMITTEE (In Full) | | | | |
| $ \rangle$ | | rt and Defend | PAC | | |
| \mathbb{Z} | Suppo | m and belefa | | | |
| | Full Name (Last, First, Middle Initial) | | | | |
| A. | Kinsey, Paul | | Date of Receipt | | |
| | Mailing Address / Sourced Ct | • | 07/01/2016 | | |
| | City State | Zip Code | | | |
| | Millersville MI | 21108 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | | 70000 | | |
| | federal political committee. | | | | |
| | Name of Employer Occupa | ation | | | |
| | Self | dentist | | | |
| | Receipt For: Aggree | gate Year-to-Date ▼ | | | |
| | Primary General | 700 | 7 | | |
| | Other (specify) ▼ | . , . , , , , , , , , , , , , , , , , , | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | |
| В. | Moraica George | | Date of Receipt | | |
| | Mailing Address | | | | |
| | 11010 Augusta Dr | | 107052015 | | |
| | City State | Zip Code | | | |
| | Kansas City KS | ee104 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | | | 7.00 | | |
| | · | | | | |
| | Name of Employer Occup. | | | | |
| | Possint For: | edical device sales | <u>: </u> | | |
| Primary General Aggregate Other (specify) ▼ | | gate Year-to-Date ▼ | | | |
| | | 2,0000 | | | |
| | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | |
| C. | | | Date of Receipt | | |
| | Mailing Address H308 Propodve St | k1\.; | 78 15 7015 | | |
| | City State | Zip Code | | | |
| | Washington DC | 20016 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | | 200.00 | | |
| federal political committee. | | | 200. | | |
| | Name of Employer Occup | ation | | | |
| | se)f | out relations | | | |
| Primary General | | gate Year-to-Date ▼ | | | |
| | | 7.0.00 | 3 | | |
| | Other (specify) ▼ | <u> </u> | | | |
| Г | | | | | |
| 5 | SUBTOTAL of Receipts This Page (optional) | · | | | |
| \vdash | | | | | |
| 1 | OTAL This Period (last page this line number only) | | > | | |

| SCHEDULE A | (FEC | Form | 3X) |
|--------------|--------------|------|-----|
| ITEMIZED REC | EIPTS | ; | |

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a **Detailed Summary Page** 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) PAC Defend Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation self Receipt For: **Primary** General Other (specify) -Full Name (Last, First, Middle Initial) B. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation exec Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Care Date of Receipt Mailing Address City State Zip Code MC 20816 Amount of Each Receipt this Period ~~ 00 FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: **Primary** General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) OF 4 FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 12 **Detailed Summary Page** 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) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Addres City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Student Receipt For: Aggregate Year-to-Date General **Primary** 00 Other (specify) Full Name (Last, First, Middle Initial) Mood Date of Receipt Mailing Addre City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Name of Employer Receipt For: **Primary** General Other (specify) ▼ Full Name (Last, First, Middle Initial) vantardol Date of Receipt Mood Mailing Address State City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Panassas wate Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)......

SCHEDULE A (FEC Form 3X)

Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the 11a **Detailed Summary Page** 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) Full Name (Last, First, Middle Initial Date of Receipt Mailing Address Zip Code City State 22152 Amount of Each Receipt this Period 0005/1840 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address WALL AND A POST A REPORT OF A PROPERTY. City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General **Primary** Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)......

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PAGE

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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 No (check only of 21b 27 | ne) 22 23 24 25 26 28a 28b 28c 29 30b |
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| Any information copied from such Reports and States or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) | ments may not be sold or used the and address of any political and Defen | I committee to s | olicit contributions from such committee. |
| A. Well Dung (after Mailing Address 513 Morse St | | | Date of Disbursement |
| Candidate Name | ment For: Primary General Other (specify) ▼ | 0.0.3 Category/ Type | Amount of Each Disbursement this Period |
| B. Reserve Officers Mailing Address Constitution A | NE. | | Date of Disbursement |
| Purpose of Disbursement Candidate Name | State Zip Code Co | 0.03 Category/ Type | Amount of Each Disbursement this Period |
| Full Name (Last, First, Middle Initial) c. Nog Tag Baker Mailing Address 3206 Grace St | / NW | | Date of Disbursement |
| Purpose of Disbursement Candidate Name | State Zip Code 20007 ment For: Primary General Other (specify) | OO3 Category/ Type | Amount of Each Disbursement this Period |
| SUBTOTAL of Disbursements This Page (optional). | | ····· | 1,82400 |

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 (check only 21b 27 | | PAGE ZOF | 3 26 30 |
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| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | | | | | |
| NAME OF COMMITTEE (In Full) | upport and | Defend | PAC | | |
| Full Name (Last, First, Middle Initial) A. Capitol Grille Mailing Address | | | Date of Disbursemen | 1 2015 | |
| City Woshington Purpose of Disbursement Candidate Name Office Sought: House Disbursem | DC 20004 tes | 0.03 Category/ Type | Amount of Each Dist | oursement this Pe | eriod |
| Senate | Primary ☐ General Other (specify) ▼ | | | | |
| Full Name (Last, First, Middle Initial) B. Kinkos Mailing Address 3111 14 th 5t N1 | | | Date of Disbursement | nt ' 20-75 | |
| Purpose of Disbursement Candidate Name Signage | itate Zip Code)C 20010 | 0.0.3 Category/ Type | Amount of Each Disl | oursement this Pe | eriod |

| Office Sought: | House Senate President District: | Disbursement For: Primary General Other (specify) ▼ | | |
|--------------------------------------|--------------------------------------|------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------|
| Mailing Addres City Purpose of Dis | Men p Park bursement ad House Senate | State Zip Code A 9407 Verti Sing Disbursement For: Primary General | O.O.H. Category/ Type | Date of Disbursement OS 2015 Amount of Each Disbursement this Period |
| State: | President District: | Other (specify) ▼ | | |
| SUBTOTAL of D | Disbursements This Pag | e (optional) | ····· | 1,438.63 |

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

| SCHEDULE B (FEC Form 3X) | | FOR LINE NUMB | BER: PAGE 3 OF 2 |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only one) | |
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| NAME OF COMMITTEE (In Full) | | | |
| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | 0.0 | 1 7.0 |
| | Jupport and | Deteno | PAL |
| Full Name (Last, First, Middle Initial) | | | |
| A. Ron DeSantis fo | v Senate | | te of Disbursement |
| Mailing Address | y senate | | 7015 |
| PO Box 1425 | | | |
| City | tate Zip Code | | |
| Ponte Vedra Bea | ch, FL 370 | 34 | |
| Purpose of Disbursement | | \ | ount of Each Disbursement this Period |
| Candidate Name | |)- Category/ | 3550 |
| Office Sought: House Disbursen | ' | Type | 1,000. |
| Office Sought: House Disbursen | ent For: | | |
| ∑ Senate ∑ | Primary General | | |
| State: (7) District: | Other (specify) ▼ | | |
| Full Name (Last, First, Middle Initial) | | | |
| B. | , | Da | te of Disbursement |
| Will Hurd for | Congress | | ×M / D D / Y Y Y Y |
| Mailing Address | J J | | 0 05 2015 |
| City PO BOX 760129 | itate Zip Code | <u> </u> | |
| San Antonin t | 79745 | | |
| Purpose of Disbursement | **** / 0 / / / | W | |
| donation | <u> </u> |) Am | ount of Each Disbursement this Period |
| Candidate Name | , | Category/ | 50000 |
| Office Sought: House Disbursen | pent For | Туре | |
| | Primary 🔀 General | | |
| I I | Other (specify) ▼ | | |
| State: TX District: 23 | | | |
| Full Name (Last, First, Middle Initial) | | | |
| C. D · AA · A | | Da | te of Disbursement |
| Mailing Address | Congress | | 9 7 2 7 3 1 2 |
| 80 Box 3016 | V | ا ت | |
| | State Zip Code | | |
| Stuart Fl | 34995 | | |
| Purpose of Disbursement | | | |
| Candidate Name | <u> </u> | / | nount of Each Disbursement this Period |
| Brian Mast | ' | Category/ Type | 1.0.00 |
| Office Sought: House Disbursen | nent For: | · | |
| | Primary General | | |
| President President | Other (specify) ▼ | | |
| State: FL District: 18 | | | - Pres |
| SUBTOTAL of Disbursements This Page (optional) | | | 750000 |
| CONTROL OF PRODUCTION THIS I age (opublia) | | - <u> </u> | |
| TOTAL This Period (last page this line number only) | | ······ | 5,7.62.63 |

COMMUSSION Federal Election Commission 499 E St. NW Washington DC 20463

| Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this fi | OR INCOMING DOCUMENTS |
|------------------------------------------------------------------------------------------------------|-------------------------------|
| Hand Delivered | Date of Receipt |
| Postmarked USPS First Class Mail | Date of Receipt |
| USPS Registered/Certified | Postmarked (R/C) |
| USPS Priority Mail | Postmarked |
| | Postmarked |
| USPS Priority Mail Express | Fostillared |
| Postmark Illegible | |
| No Postmark | |
| Overnight Delivery Service (Specify): | Shipping Date |
| | Next Business Day Delivery |
| Received from House Records & Registrat | Date of Receipt ion Office |
| Received from Senate Public Records Office | Date of Receipt ce |
| Received from Electronic Filing Office | Date of Receipt |
| Other (Specify): | Date of Receipt or Postmarked |

2/5/16 DATE PREPARED

PREPARER (3/2015)