

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

Reclaim America PAC

ADDRESS (number and street) 228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC) Alexandria VA 22314

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

C C00500025

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 [MM] / [DD] / [YYYY] in the State of []

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

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2015 through [MM] / [DD] / [YYYY] 06 / 30 / 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 Lisa Lisker

Signature of Treasurer Lisa Lisker [Electronically Filed] Date 07 / 31 / 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.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Reclaim America 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="2015"/>	<input type="text" value="31368.05"/>	<input type="text" value="31368.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31368.05"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1258026.55"/>	<input type="text" value="1258026.55"/>
(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="1289394.60"/>	<input type="text" value="1289394.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="738548.05"/>	<input type="text" value="738548.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="550846.55"/>	<input type="text" value="550846.55"/>
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)

Page 3

Write or Type Committee Name

Reclaim America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 06 / 30 / 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).....	193540.00	193540.00
(ii) Unitemized	25710.16	25710.16
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	219250.16	219250.16
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	159500.00	159500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	378750.16	378750.16
12. Transfers From Affiliated/Other Party Committees.....	879276.39	879276.39
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))..... ▶	1258026.55	1258026.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1258026.55	1258026.55

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	692738.05	692738.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	692738.05	692738.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	40000.00
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	5810.00	5810.00
(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)).....	5810.00	5810.00
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)) ..	738548.05	738548.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	738548.05	738548.05

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)	378750.16	378750.16
34. Total Contribution Refunds (from Line 28(d))	5810.00	5810.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	372940.16	372940.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	692738.05	692738.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	692738.05	692738.05

**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 490
(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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. DANA K. ANDERSON SR.

Mailing Address 401 WILSHIRE BLVD
SUITE 700

City State Zip Code
SANTA MONICA CA 90401-1452

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

Name of Employer Occupation
THE MACERICH COMPANY VICE CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.724695

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. PHILMORE B. ANDERSON

Mailing Address 2354 N. FILLMORE STREET

City State Zip Code
ARLINGTON VA 22207-4954

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

Name of Employer Occupation
NAVIGATORS GLOBAL PRESIDENT, FOUNDING & MANAGING PRIN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726550

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RICHARD BANKS

Mailing Address P.O. BOX 5146

City State Zip Code
SANTA BARBARA CA 93150-5146

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740764

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 490
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MARY LYNN BOGLE
Full Name (Last, First, Middle Initial)

Mailing Address 104 EDGEWATER CIRCLE

City DEXTER	State NM	Zip Code 88230-9634
----------------	-------------	------------------------

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

Name of Employer HINKLE SHANOR LLP	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2015

Transaction ID : SA11.728248

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. MR. JOHN J. BULFIN
Full Name (Last, First, Middle Initial)

Mailing Address 134 CORTEZ RD.

City WEST PALM BEACH	State FL	Zip Code 33405-4104
-------------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation GENERAL COUNSEL
-----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA11.727053

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. BRIAN CANIDA
Full Name (Last, First, Middle Initial)

Mailing Address 325 S. BISCAYNE BLVD

City MIAMI	State FL	Zip Code 33131-2306
---------------	-------------	------------------------

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

Name of Employer AALVAREZ, ARRIETA & DIAZ-SILVEIRA	Occupation LAWYER
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA11.741210

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. WARREN CHASE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 32188
 City PALM BEACH GARDENS State FL Zip Code 33420-2188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA11.725783
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MRS. WILLIAM H. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3716 MAPLEWOOD AVENUE
 City DALLAS State TX Zip Code 75205-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.802987
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION
 REFUNDED \$4,050.00 ON 06/18/2015

C. HOWARD COLLIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 581 JOLLY ROGERS RD
 City ABILENE State TX Zip Code 79601-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.725886
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. CESAR V. CONDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 7TH STREET NW STE. 200
 City WASHINGTON State DC Zip Code 20001-3883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAVIGATORS GLOBAL Occupation FOUNDRING PRINCIPAL & POLICY ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11.726547
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. MR. GARY PATRICK COUGHLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 5TH AVE S, STE 201 STE 201
 City NAPLES State FL Zip Code 34102-6407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.724482
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MR. GARY PATRICK COUGHLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 5TH AVE S, STE 201 STE 201
 City NAPLES State FL Zip Code 34102-6407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA11.725466
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. GARY PATRICK COUGHLAN
 Mailing Address 1100 5TH AVE S, STE 201
 STE 201
 City State Zip Code
 NAPLES FL 34102-6407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2015
Transaction ID : SA11.726300
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. CHRISTOPHER C. COX
 Mailing Address 2205 WINDSOR ROAD
 City State Zip Code
 ALEXANDRIA VA 22307-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAVIGATORS GLOBAL FOUNDING PRINCIPAL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726549
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. KATHY B. CROSS
 Mailing Address 232 ROYAL PALM WAY
 City State Zip Code
 BELLE GLADE FL 33430-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED OFFICE SUPPLIES/FURNITURE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727064
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MRS. CAROLYN C. D'ISERNIA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 27158
 City PANAMA CITY State FL Zip Code 32411-7158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740742
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MS. MIRIAM A. D'ISERINA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 960
 City PANAMA CITY State FL Zip Code 32402-0960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740739
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. MR. JACK DAVID
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 BRUNING ROAD
 City NEW HARTFORD State CT Zip Code 06057-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : SA11.725292
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 490
	<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)
Reclaim America PAC

A. MR. JACK DAVID
Full Name (Last, First, Middle Initial)

Mailing Address 351 BRUNING ROAD

City NEW HARTFORD State CT Zip Code 06057-2401

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

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2015
Transaction ID : SA11.742081

Amount of Each Receipt this Period
 4000.00

CONTRIBUTION

B. MR. GUILLERMO DE LA VINA
Full Name (Last, First, Middle Initial)

Mailing Address 13291 RALSTON AVENUE

City SYLMAR State CA Zip Code 91342-1255

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

Name of Employer SIGUE CORPORATION Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11.727365

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

REFUNDED \$1560.00 ON 06/18/2015

C. MR. PAUL J. DIMARE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 900460

City HOMESTEAD State FL Zip Code 33090-0460

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

Name of Employer DIMARE FRESH Occupation PRESIDENT AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA11.725341

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. BRIAN DISERNIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3605 DELWOOD DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408-7404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EASTERN SHIPBUILDING GROUP, INC. Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA11.740740
 Amount of Each Receipt this Period **5000.00**
 CONTRIBUTION

B. MR. JAMES D. DONAHUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8125 HICKORY KNOLL LANE
 City MINT HILL State NC Zip Code 28227-7900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEO GROUP Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : SA11.727056
 Amount of Each Receipt this Period **750.00**
 CONTRIBUTION

C. SHARON DOYLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3621 N POINT RD UNIT 303
 City OSPREY State FL Zip Code 34229-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 13 / 2015**
Transaction ID : SA11.723574
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. BRIAN R. EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 28 ELEUTHERA DRIVE

City BOYNTON BEACH State FL Zip Code 33435-3307

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

Name of Employer THE GEO GROUP, INC. Occupation C.F.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11.727046

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. PATRICIA EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 228 PEARL AVENUE

City TAVERNIER State FL Zip Code 33070-2437

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA11.724013

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. PATRICIA EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 228 PEARL AVENUE

City TAVERNIER State FL Zip Code 33070-2437

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA11.724014

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. PATRICIA EVANS
Full Name (Last, First, Middle Initial)

Mailing Address 228 PEARL AVENUE

City TAVERNIER State FL Zip Code 33070-2437

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2015
Transaction ID : SA11.724015

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. LOUIS FERRARI
Full Name (Last, First, Middle Initial)

Mailing Address 410 PARK AVE

City MATTITUCK State NY Zip Code 11952-2221

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.728000

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MR. JAMES D. FINCH
Full Name (Last, First, Middle Initial)

Mailing Address 1805 TENNESSEE AVENUE

City LYNN HAVEN State FL Zip Code 32444-4222

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740744

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MS. HELENE FRIED
Full Name (Last, First, Middle Initial)
Mailing Address 161 WEST 161ST STREET APT. 26B

City NEW YORK	State NY	Zip Code 10023-
------------------	-------------	--------------------

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

Name of Employer SELF-EMPLOYED	Occupation C.O.O.
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2015

Transaction ID : SA11.757642

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. MR. STEPHEN V. FULLER
Full Name (Last, First, Middle Initial)
Mailing Address 100 S. BIRCH ROAD, APT. 2706

City FORT LAUDERDALE	State FL	Zip Code 33316-1549
-------------------------	-------------	------------------------

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

Name of Employer THE GEO GROUP, INC.	Occupation SENIOR VICE PRESIDENT
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA11.727057

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. LESTER GEGENHEIMER
Full Name (Last, First, Middle Initial)
Mailing Address 12500 LARAMIE PARKE

City AUSTIN	State TX	Zip Code 78726-4019
----------------	-------------	------------------------

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

Name of Employer SELF	Occupation LAWYER
--------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2015

Transaction ID : SA11.727156

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 17 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. STEVEN M. GREENBERG

Mailing Address 7900 GLADES ROAD STE. 520

City State Zip Code
BOCA RATON FL 33434-4105

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

Name of Employer Occupation
GRGO LAW ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : SA11.757643

Amount of Each Receipt this Period
4300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. W THOMAS GREEN

Mailing Address 194 BONNER ROAD

City State Zip Code
CARROLLTON GA 30117-8873

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11.725757

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. HOWARD D. GROFF

Mailing Address 9832 CALVIN AVENUE

City State Zip Code
NORTHRIDGE CA 91324-1619

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

Name of Employer Occupation
NORTHWEST EXCAVATING COMPANY, INC. CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2015
Transaction ID : SA11.726891

Amount of Each Receipt this Period
3500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MRS. SUSAN L. GROFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 9832 CALVIN AVENUE
 City NORTHRIDGE State CA Zip Code 91324-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTHWEST EXCAVATING COMPANY INC. Occupation CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 25 / 2015**
Transaction ID : SA11.726892
 Amount of Each Receipt this Period **3500.00**
 CONTRIBUTION

B. MR. LAURENCE E. HIRSCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 CRESCENT COURT SUITE 550
 City DALLAS State TX Zip Code 75201-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 23 / 2015**
Transaction ID : SA11.725340
 Amount of Each Receipt this Period **5000.00**
 CONTRIBUTION

C. MS. JENNIFER HOUSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2918 BANYAN BOULEVARD CIRCLE NW
 City BOCA RATON State FL Zip Code 33431-6335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : SA11.727062
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. WILLIAM HALE HUBBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 S. BISCAYNE BLVD
 APT 4006
 City MIAMI State FL Zip Code 33131-5384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HALE HANN INVESTMENTS LLC Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : SA11.757640
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. L E HUCKLEBERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6485 E ELMARO CIRCLE
 City PARADISE VALLEY State AZ Zip Code 85253-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VILLAGE PROPERTIES, INC. Occupation PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11.725750
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. JOHN M. HURLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2918 BANYAN BOULEVARD CIRCLE NW
 City BOCA RATON State FL Zip Code 33431-6335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE GEO GROUP, INC. Occupation SR. VICE-PRESIDENT OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727052
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 20 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. ROY S. ISBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 10800 LA SALINAS CIRCLE
 City BOCA RATON State FL Zip Code 33428-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2015
Transaction ID : SA11.724567
 Amount of Each Receipt this Period
 10.00
 CONTRIBUTION

B. MR. GAD JANAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4621 S. OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : SA11.757641
 Amount of Each Receipt this Period
 2300.00
 CONTRIBUTION

C. MRS. MARLENE JANAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4621 S. OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : SA11.757639
 Amount of Each Receipt this Period
 2300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4610.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. THOMAS JORGENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 ZAPATA WAY
 City PORTOLA VALLEY State CA Zip Code 94028-7346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF PRIVATE INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 24 / 2015
Transaction ID : SA11.723990
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MR. DEE KELLY SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 MAIN STREET SUITE 2500
 City FORT WORTH State TX Zip Code 76102-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 03 / 31 / 2015
Transaction ID : SA11.771869
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. DAVID LEVINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 EAST 83RD ST.
 City NEW YORK State NY Zip Code 10028-0418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REDSTONE PARTNERS REAL ESTATE FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 03 / 30 / 2015
Transaction ID : SA11.727146
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. BOB LONG
Full Name (Last, First, Middle Initial)
Mailing Address 1249 N. LAKESHORE DR.
City SARASOTA State FL Zip Code 34231-3435
FEC ID number of contributing federal political committee. **C**
Name of Employer JR L VENTURES INC. DBA MARINE CONCEP Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA11.724305
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. MR. MARK A. LONGORIA
Full Name (Last, First, Middle Initial)
Mailing Address 11519 OCOTILLO DRIVE
City HOUSTON State TX Zip Code 77095-4854
FEC ID number of contributing federal political committee. **C**
Name of Employer D.T.C. DRUG TESTING CORPORATION Occupation C.E.O.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA11.727063
Amount of Each Receipt this Period 2000.00
CONTRIBUTION

C. MR. DANIEL R. LOZIER
Full Name (Last, First, Middle Initial)
Mailing Address 2316 CAMRYNS CROSSING
City PANAMA CITY State FL Zip Code 32405-6646
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA11.740741
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. JENNIFER LUKAWSKI
 Mailing Address 8704 PLYMOUTH ROAD
 City State Zip Code
 ALEXANDRIA VA 22308-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BGR GROUP CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11.765823
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. SHAYN P. MARCH
 Mailing Address 12501 NW 75TH STREET
 City State Zip Code
 PARKLAND FL 33076-4203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THE GEO GROUP, INC. FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727048
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ARTHUR MARKS
 Mailing Address 10836 PLEASANT HILL DRIVE
 City State Zip Code
 POTOMAC MD 20854-1511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WEDNESDAY MANAGEMENT MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11.727175
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 490
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MS. AMBER D. MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 621 NW 53RD
 ONE PARK PLACE, SUITE 500
 City BOCA RATON State FL Zip Code 33487-8235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE GEO GROUP Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727061
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MRS. DAWN M. MASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5851 LA GORCE CIRCLE
 City LAKE WORTH State FL Zip Code 33463-7376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEACOAST UNIFORMS Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727060
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. MR. MARC K. MASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5851 LA GORCE CIRCLE
 City LAKE WORTH State FL Zip Code 33463-7376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEACOAST UNIFORMS Occupation PRESIDENT/OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727065
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. CHRISTOPHER D. MEEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1230 AVENUE OF THE AMERICAS
 19TH FLOOR
 City NEW YORK State NY Zip Code 10020-1520
 Name of Employer STATE STREET GLOBAL ADVISORS Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA11.727360
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

B. S ISAAC MEKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1641 3RD AVE
 City NEW YORK State NY Zip Code 10128-3623
 Name of Employer AMERICAN SOCIETY FOR YASD VASHEM Occupation DIRECTOR OF DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA11.725767
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. MR. LAWRENCE A. MOENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1480 NORTH LAKE WAY
 City PALM BEACH State FL Zip Code 33480-3031
 Name of Employer LAWRENCE A. MOENS ASSOCIATES Occupation REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA11.727051
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. KENNETH R. MUNROE
 Full Name (Last, First, Middle Initial)
 Mailing Address 617 N. BAY DRIVE
 City LYNN HAVEN State FL Zip Code 32444-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740743
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. MR. DANIEL R. MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9911 SHADY COVE DR.
 City FAIRFAX STATION State VA Zip Code 22039-2962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BGR GROUP GENERAL COUSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2015
Transaction ID : SA11.723904
 Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

C. MR. BRIAN R. NEFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 7133 FISHER ISLAND DRIVE
 City MIAMI BEACH State FL Zip Code 33109-0790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CTS ENGINES INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.724239
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 9000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 490
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. RONALD NOLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 25910 SPRING VALLEY RD
 City LOUISBURG State KS Zip Code 66053-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 24 / 2015
Transaction ID : SA11.723978
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

B. RONALD NOLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 25910 SPRING VALLEY RD
 City LOUISBURG State KS Zip Code 66053-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 24 / 2015
Transaction ID : SA11.723979
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

C. KEITH NORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 STONEHAVEN RD
 City JACKSON State TN Zip Code 38305-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPORTS ORTHOPEDICS & SPINE Occupation ORTHOPAEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA11.723971
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. BARRY PAGE

Mailing Address 1536 SPRINGFIELD COURT

City State Zip Code
JAMISON PA 18929-1669

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2015

Transaction ID : SA11.728381

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MAURICE A. PERKINS

Mailing Address 2725 RITTENHOUSE ST, NW

City State Zip Code
WASHINGTON DC 20015-1519

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

Name of Employer Occupation
AMERICAN COUNCIL OF LIFE INSURERS FEDERAL RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2015

Transaction ID : SA11.727615

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DOUGLAS PHAIR

Mailing Address 1912 MAIN ST

City State Zip Code
MILES CITY MT 59301-3725

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

Name of Employer Occupation
WESTERN POWDERS INC EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015

Transaction ID : SA11.771190

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. JAMES L. PITTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 7TH STREET NW
 SUITE 200
 City WASHINGTON State DC Zip Code 20001-3883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAVIGATORS GLOBAL Occupation FOUNDED PRINCIPAL
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726548
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MR. ANDREW F. PUZDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6307 CARPENTERIA AVENUE
 SUITE A
 City CARPINTERIA State CA Zip Code 93013-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CKE RESTAURANTS Occupation EXECUTIVE
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11.727363
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. MR. ALFRED P. RAMON
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 SW 198TH TERRACE
 City PEMBROKE PINES State FL Zip Code 33029-1236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEO GROUP, INC. Occupation V.P., C.I.O.
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727049
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. ROBERT REGAN

Mailing Address 4235 N. 23RD STREET

City ARLINGTON State VA Zip Code 22207-3922

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

Name of Employer 21ST CENTURY FOX Occupation CORPORATE EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11.759372

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. SONYA ROOD

Mailing Address 3030 HARTLEY ROAD, SUITE 310

City JACKSONVILLE State FL Zip Code 32257-8213

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.724122

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DANIEL S. ROSENBAUM

Mailing Address 11962 WATERWOOD DRIVE

City BOCA RATON State FL Zip Code 33428-1026

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

Name of Employer ROSENBAUM MOLLENGARDEN PLLC Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2015
Transaction ID : SA11.725596

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 490
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. RICHARD RUIZ
Full Name (Last, First, Middle Initial)

Mailing Address 1902 W CANTON RD

City EDINBURG State TX Zip Code 78539-6625

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

Name of Employer RMR INC DBA RUIZ SALES Occupation PRODUCE DISTRIBUTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2015
Transaction ID : SA11.723845

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. RICHARD RUIZ
Full Name (Last, First, Middle Initial)

Mailing Address 1902 W CANTON RD

City EDINBURG State TX Zip Code 78539-6625

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

Name of Employer RMR INC DBA RUIZ SALES Occupation PRODUCE DISTRIBUTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2015
Transaction ID : SA11.723986

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. RICHARD RUIZ
Full Name (Last, First, Middle Initial)

Mailing Address 1902 W CANTON RD

City EDINBURG State TX Zip Code 78539-6625

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

Name of Employer RMR INC DBA RUIZ SALES Occupation PRODUCE DISTRIBUTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA11.724287

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 490
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. RICHARD RUIZ

Mailing Address 1902 W CANTON RD

City EDINBURG	State TX	Zip Code 78539-6625
------------------	-------------	------------------------

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

Name of Employer RMR INC DBA RUIZ SALES	Occupation PRODUCE DISTRIBUTOR
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11.725736

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. IGNACIO E. SANCHEZ

Mailing Address 11525 LAKE POTOMAC DRIVE

City POTOMAC	State MD	Zip Code 20854-1220
-----------------	-------------	------------------------

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

Name of Employer DLA PIPER, LLP	Occupation PARTNER
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA11.723910

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ANDREW SCHARF

Mailing Address 200 EAST 64TH STREET

City NEW YORK	State NY	Zip Code 10065-7426
------------------	-------------	------------------------

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

Name of Employer SCHARF BROTHERS LLC	Occupation INVESTOR
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2015

Transaction ID : SA11.724757

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 490
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. DR. ANN M. SCHLARB
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 S. OCEAN BLVD. #1701
 City BOCA RATON State FL Zip Code 33432-6295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE GEO GROUP Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA11.727047
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. MR. NATHAN SCHULTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 LYNNBROOK ROAD
 City ST. LOUIS State MO Zip Code 63131-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEEFE GROUP Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA11.727050
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

C. ROBERT SIERRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1265 ESTE LANE
 City SANTA FE State NM Zip Code 87501-8872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA11.726651
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 490
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. REED E. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 828 LODGE CREEK DRIVE
 City NEW BRAUNFELS State TX Zip Code 78132-3650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GEO GROUP Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA11.725966
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. JOHN SNEDEKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 RAMSEY ROAD
 City YARDLEY State PA Zip Code 19067-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer J.A.S. PRECISION, INC. Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015
Transaction ID : SA11.724017
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. MR. JAMES N. STANARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 LIINDEN LANE
 City CHATHAM State NJ Zip Code 07928-1623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.771980
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MRS. JANET G. STANARD
 Mailing Address 15 LINDEN LANE
 City State Zip Code
 CHATHAM NJ 07928-1623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.771979
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MARC I. STERN
 Mailing Address 23700 MALIBU COLONY ROAD
 City State Zip Code
 MALIBU CA 90265-6629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TCW GROUP, INC. VICE CHAIRMAN/C.E.O.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2015
Transaction ID : SA11.723808
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. RALPH SUAREZ
 Mailing Address 15615 INDIAN QUEEN DR
 City State Zip Code
 ODESSA FL 33556-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2015
Transaction ID : SA11.727099
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. W. CLARKE SWANSON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 148
 1050 OAKVILLE CROSS ROAD
 City OAKVILLE State CA Zip Code 94562-0148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SWANSON VINEYARDS Occupation OWNER/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 18 / 2015**
Transaction ID : SA11.724870
 Amount of Each Receipt this Period **5000.00**
 CONTRIBUTION

B. MR. GENE T. SYKES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1827 WESTRIDGE ROAD
 City LOS ANGELES State CA Zip Code 90049-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOLDMAN SACHS Occupation INVESTMENT BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 18 / 2015**
Transaction ID : SA11.726663
 Amount of Each Receipt this Period **5000.00**
 CONTRIBUTION

C. P J TRACY
 Full Name (Last, First, Middle Initial)
 Mailing Address 722 DUBLIN DR
 City MISHAWAKA State IN Zip Code 46545-3589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 16 / 2015**
Transaction ID : SA11.723747
 Amount of Each Receipt this Period **100.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10100.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 37 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. P J TRACY

Mailing Address 722 DUBLIN DR

City MISHAWAKA State IN Zip Code 46545-3589

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.724826

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. P J TRACY

Mailing Address 722 DUBLIN DR

City MISHAWAKA State IN Zip Code 46545-3589

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726506

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. WARREN TRYON

Mailing Address 216 9TH STREET SE

City WASHINGTON State DC Zip Code 20003-2111

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

Name of Employer CAPITOL COUNSEL Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11.726913

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 38 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. DAVID J. VENTURELLA

Mailing Address 621 NW 53RD ST

City State Zip Code
BOCA RATON FL 33487-8235

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

Name of Employer Occupation
THE GEO GROUP, INC. SENIOR V.P.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727058

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. STEVE C. WATSON

Mailing Address 5406 GROVE STREET

City State Zip Code
CHEVY CHASE MD 20815-7103

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

Name of Employer Occupation
LOEWS CORPORATION EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.746889

Amount of Each Receipt this Period
2680.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MARIAN WEEKS

Mailing Address 1143 OLONY DRIVE

City State Zip Code
MARIETTA GA 30068-

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

Name of Employer Occupation
F. MARIAN WEEKS P.C. ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11.728664

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4680.00

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

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

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

FOR LINE NUMBER: PAGE 39 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. THOMAS M. WIERDSMA

Mailing Address 2315 DATE PALM ROAD

City State Zip Code
BOCA RATON FL 33432-7919

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

Name of Employer Occupation
THE GEO GROUP, INC. SR. VICE-PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727054

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. ELINOR K. WIEST

Mailing Address 2 KNOLLWOOD RD

City State Zip Code
PINEHURST NC 28374-8315

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2015
Transaction ID : SA11.723756

Amount of Each Receipt this Period
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MS. ELINOR K. WIEST

Mailing Address 2 KNOLLWOOD RD

City State Zip Code
PINEHURST NC 28374-8315

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2015
Transaction ID : SA11.723757

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1050.00

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

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

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

FOR LINE NUMBER: PAGE 40 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.724833
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.724834
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

C. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726513
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726514
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

B. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11.739213
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

C. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11.739214
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 42 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2015
Transaction ID : SA11.751831
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2015
Transaction ID : SA11.751832
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

C. MS. ELINOR K. WIEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 KNOLLWOOD RD
 City PINEHURST State NC Zip Code 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015
Transaction ID : SA11.763129
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 43 OF 490
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MS. ELINOR K. WIEST
 Mailing Address 2 KNOLLWOOD RD
 City State Zip Code
 PINEHURST NC 28374-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2015
Transaction ID : SA11.763130
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JOHN I. WILLIAMS JR.
 Mailing Address 166 W. ALEXANDER PALM ROAD
 City State Zip Code
 BOCA RATON FL 33432-7907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TOYOTA MALL OF GEORGIA SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11.726499
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DR. GEORGE C. ZOLEY
 Mailing Address 1515 FAN PALM ROAD
 City State Zip Code
 BOCA RATON FL 33432-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THE GEO GROUP INC. OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11.727055
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 10025.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. FLAGLER DRIVE LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1800
 City PALM BEACH State FL Zip Code 33402-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA11.740738
 Amount of Each Receipt this Period
 4000.00
 CONTRIBUTION
 ATTRIBUTION TO PARTNERS REQUESTED

B. WILEY REIN LLP
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 K. STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2015
Transaction ID : SA11.727507
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION
 PARTNERS EXCEEDING ITEMIZATION THRESHOLD BELOW

C. MR. ANDREW G. MCBRIDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 K. STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILEY REIN, LLP ATTORNEY AT LAW
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2015
Transaction ID : SA11.738687
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION
[MEMO ITEM]
 PARTNERSHIP MEMO

SUBTOTAL of Receipts This Page (optional).....▶	9000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 490
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. BERT REIN		Date of Receipt MM / DD / YYYY 04 / 08 / 2015
Mailing Address 1776 K ST NW STE 800		Transaction ID : SA11.738700
City WASHINGTON	State DC	Zip Code 20006-2333
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer WILEY REIN LLP	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	[MEMO ITEM] PARTNERSHIP MEMO

Full Name (Last, First, Middle Initial) B. MR. RAY MICHAEL SENKOWSKI		Date of Receipt MM / DD / YYYY 04 / 08 / 2015
Mailing Address 9559 BELL DR		Transaction ID : SA11.738663
City GREAT FALLS	State VA	Zip Code 22066-3723
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer WILEY REIN LLP	Occupation ATTORNEY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	[MEMO ITEM] PARTNERSHIP MEMO

Full Name (Last, First, Middle Initial) C. MS. NANCY JANE VICTORY		Date of Receipt MM / DD / YYYY 04 / 08 / 2015
Mailing Address 9559 BELL DRIVE		Transaction ID : SA11.738665
City GREAT FALLS	State VA	Zip Code 22066-3723
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer WILEY REIN L.L.P.	Occupation PARTNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3200.00	[MEMO ITEM] PARTNERSHIP MEMO

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	193540.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 490
<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)
Reclaim America PAC

A. AFLAC, INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1932 WYNNTON ROAD
 City COLUMBUS State GA Zip Code 31999-0001
 FEC ID number of contributing federal political committee. **C** C00034157
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2015
Transaction ID : SA11.769374
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. ALTRIA GROUP, INC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CONSTITUTION AVE. NW STE. 400W
 City WASHINGTON State DC Zip Code 20001-2155
 FEC ID number of contributing federal political committee. **C** C00089136
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.724696
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. AMERICAN AIRLINES PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 17TH STREET NW #600
 City WASHINGTON State DC Zip Code 20036-4718
 FEC ID number of contributing federal political committee. **C** C00107300
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11.724379
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVE NW

City	State	Zip Code
WASHINGTON	DC	20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.724083

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERISOURCEBERGEN CORPORATION PAC

Mailing Address 1300 MORRIS DRIVE
SUITE 100

City	State	Zip Code
CHESTERBROOK	PA	19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.724082

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMGEN PAC

Mailing Address ONE AMGEN CENTER DRIVE

City	State	Zip Code
THOUSAND OAKS	CA	91320-1730

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2015

Transaction ID : SA11.724380

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. AT&T INC. FEDERAL PAC		Date of Receipt MM / DD / YYYY 03 / 16 / 2015 Transaction ID : SA11.726555
Mailing Address 208 S. AKARD STREET SUITE 2701		Amount of Each Receipt this Period 5000.00
City DALLAS State TX Zip Code 75202-4206	FEC ID number of contributing federal political committee. C C00109017	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BRIDGEPORT EDUCATION, INC. PAC		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : SA11.725296
Mailing Address 13500 EVENING CREEK DRIVE N.		Amount of Each Receipt this Period 5000.00
City SAN DIEGO State CA Zip Code 92128-8104	FEC ID number of contributing federal political committee. C C00478404	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CHS PAC		Date of Receipt MM / DD / YYYY 03 / 16 / 2015 Transaction ID : SA11.726557
Mailing Address 4000 MERIDIAN		Amount of Each Receipt this Period 2500.00
City FRANKLIN State TN Zip Code 37067-6325	FEC ID number of contributing federal political committee. C C00485896	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE NW
SUITE 560

City WASHINGTON State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SA11.727245

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DELOITTE FEDERAL PAC

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044-0365

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 03 / 2015

Transaction ID : SA11.724375

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SA11.727362

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. FEDERAL EXPRESS PAC

Mailing Address 942 S. SHADY GROVE ROAD
1ST FLOOR

City MEMPHIS State TN Zip Code 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2015

Transaction ID : SA11.725294

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. FEDERATION OF AMERICAN HOSPITALS PAC

Mailing Address 750 9TH STREET NW STE. 600

City WASHINGTON State DC Zip Code 20001-4595

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SA11.726850

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. FOX PAC

Mailing Address 400 N. CAPITOL STREET NW SUITE 890

City WASHINGTON State DC Zip Code 20001-1555

FEC ID number of contributing federal political committee. **C** C00171421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SA11.726851

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 490
	<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	

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. FRANCHISING PAC

Mailing Address 1501 K. STREET NW
SUITE 350

City WASHINGTON State DC Zip Code 20005-1412

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2015
Transaction ID : SA11.727244

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. GOLDMAN SACHS GROUP, INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 1000E

City WASHINGTON State DC Zip Code 20001-2171

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 10 / 2015
Transaction ID : SA11.724697

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. GOOGLE NETPAC

Mailing Address 1101 NEW YORK AVE. N.W., 2ND FL.

City WASHINGTON State DC Zip Code 20005-4344

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 27 / 2015
Transaction ID : SA11.725708

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. HCA GOOD GOVERNMENT FUND

Mailing Address **ONE PARK PLAZA, P.O. BOX 550**

City **NASHVILLE** State **TN** Zip Code **37202-0550**

FEC ID number of contributing federal political committee. **C C00067231**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **03 / 16 / 2015**

Transaction ID : SA11.726554

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. HONEYWELL INTERNATIONAL PAC

Mailing Address **101 CONSTITUTION AVENUE NW
SUITE 500W**

City **WASHINGTON** State **DC** Zip Code **20001-2177**

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **02 / 20 / 2015**

Transaction ID : SA11.725295

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. KOCHPAC - KOCH INDUSTRIES, INC PAC

Mailing Address **600 14TH STREET NW
SUITE 800**

City **WASHINGTON** State **DC** Zip Code **20005-2099**

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11.725707

Amount of Each Receipt this Period **5000.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. KPMG PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 18254
 City WASHINGTON State DC Zip Code 20036-8254
 FEC ID number of contributing federal political committee. **C** C00280222
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11.761102
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. LIFEPOINT HOSPITALS INC.
 Full Name (Last, First, Middle Initial)
 Mailing Address 330 SEVEN SPRINGS WAY
 GOOD GOVERNMENT FUND
 City BRENTWOOD State TN Zip Code 37027-5098
 FEC ID number of contributing federal political committee. **C** C00347955
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.726558
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. MICROSOFT CORPORATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 16011 NE 36TH WAY
 City REDMOND State WA Zip Code 98052-6301
 FEC ID number of contributing federal political committee. **C** C00227546
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11.727361
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11.724376

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.

City NORTH PALM BEACH State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2015
Transaction ID : SA11.723531

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. NMHC PAC

Mailing Address 1850 M. STREET NW
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : SA11.726852

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 15TH STREET NW
 STE. 200
 City WASHINGTON State DC Zip Code 20005-2635
 FEC ID number of contributing federal political committee. **C** C00323048
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2015
Transaction ID : SA11.760136
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. SOUTHERN COMPANY EMPLOYEES PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 241 RALPH MCGILL BLVD. NE
 City ATLANTA State GA Zip Code 30308-3374
 FEC ID number of contributing federal political committee. **C** C00144774
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.775134
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. T-MOBILE PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 PENNSYLVANIA AVE. NW
 SUITE 800N
 City WASHINGTON State DC Zip Code 20004-2665
 FEC ID number of contributing federal political committee. **C** C00361758
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11.739550
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. TENET HEALTHCARE CORPORATION PAC

Mailing Address 1445 ROSS AVENUE STE. 1400

City	State	Zip Code
DALLAS	TX	75202-2703

FEC ID number of contributing federal political committee. **C** C00119354

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11.725297

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. TOYOTA MOTOR NORTH AMERICA, INC. PAC

Mailing Address 601 THIRTEENTH STREET NW SUITE 910

City	State	Zip Code
WASHINGTON	DC	20005-3807

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.773212

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. TUPPERWARE CORPORATION PAC

Mailing Address 14901 S. ORANGE BLOSSOM TRL

City	State	Zip Code
ORLANDO	FL	32837-6600

FEC ID number of contributing federal political committee. **C** C00317529

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015

Transaction ID : SA11.724377

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. UNIVERSAL HEALTH SERVICES GOOD GOV'T FUND		Date of Receipt
Mailing Address 367 SUTH GULPH ROAD		<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City	State	Zip Code
KING OF PRUSSIA	PA	19406-
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00185520"/>	Transaction ID : SA11.724378
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT		Date of Receipt
Mailing Address 702 SW 8TH STREET		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
BENTONVILLE	AR	72716-6209
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00093054"/>	Transaction ID : SA11.727246
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. WALT DISNEY COMPANY PAC		Date of Receipt
Mailing Address 425 3RD STREET SW SUITE 1100		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2015"/>
City	State	Zip Code
WASHINGTON	DC	20024-3227
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00197749"/>	Transaction ID : SA11.726556
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 58 OF 490
<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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. WELLCARE HEALTH PLANS PAC
Full Name (Last, First, Middle Initial)
Mailing Address 8735 HENDERSON ROAD, REN. 2
City TAMPA State FL Zip Code 33634-1143
FEC ID number of contributing federal political committee. **C** C00390575
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2015
Transaction ID : SA11.748514
Amount of Each Receipt this Period
5000.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
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

C.
Full Name (Last, First, Middle Initial)
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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	159500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. RUBIO VICTORY COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S WASHINGTON ST
 STE 115
 City ALEXANDRIA State VA Zip Code 22314-5404
 FEC ID number of contributing federal political committee. **C** C00494617
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 879276.39

Date of Receipt 03 / 10 / 2015
Transaction ID : 021520150310
 Amount of Each Receipt this Period 104268.61
 TRANSFER
 TRANSFER NET JF PROCEEDS

B. MR. DAVID ABRAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 LOWELL LANE
 City BROOKLINE State MA Zip Code 02445-5947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ABRAMS CAPITAL MANAGEMENT, LLC INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725972.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. C. DAN ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 VILLA ROAD
 City GREENVILLE State SC Zip Code 29615-3052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THE CAPITAL CORPORATION INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724077.1.0215
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	104268.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. TAMMIE T. ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 MCELHANEY ROAD
 City State Zip Code
 TRAVELERS REST SC 29690-9489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UPSTATE PLASTIC SURGERY NURSE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724079.1.0215
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. MIRIAM OCHSHORN ADELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 S. RAMPART BLVD. STE. 440
 City State Zip Code
 LAS VEGAS NV 89145-5749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED PHYSICIAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015
Transaction ID : SA12.723792.1.0215
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. SHELDON G. ADELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 S. RAMPART BLVD. STE. 440
 City State Zip Code
 LAS VEGAS NV 89145-5749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THE VENETIAN RESORT AND HOTEL CEO/CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015
Transaction ID : SA12.723791.1.0215
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. ANTONIO C. ALAMO
Full Name (Last, First, Middle Initial)

Mailing Address 85 VENTANA CANYON DRIVE

City LAS VEGAS State NV Zip Code 89113-0138

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

Name of Employer TCA MANAGEMENT Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : SA12.725818.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. SEBASTIAN ALEXANDER
Full Name (Last, First, Middle Initial)

Mailing Address INFO REQUESTED

City INFO REQUESTED State XX Zip Code 99999-

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015

Transaction ID : SA12.724197.1.0215

Amount of Each Receipt this Period
 900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. DOUG O. ALLRED
Full Name (Last, First, Middle Initial)

Mailing Address 11452 EL CAMINO REAL SUITE 200

City SAN DIEGO State CA Zip Code 92130-2080

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

Name of Employer DOUGLAS ALLRED COMPANY Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724029.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. LISA ALVAREZ
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1286

City RANCHO SANTA FE	State CA	Zip Code 92067-1286
-------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724036.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JASON R. ANAVITARTE
Full Name (Last, First, Middle Initial)
Mailing Address 316 BLACKBERRY RUN DRIVE

City DALLAS	State GA	Zip Code 30132-1175
----------------	-------------	------------------------

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

Name of Employer KAISER PERMANENTE	Occupation HEALTHCARE
---------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723801.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ERIC M. ANTON
Full Name (Last, First, Middle Initial)
Mailing Address 7 PARK AVENUE UNIT 16A

City NEW YORK	State NY	Zip Code 10016-4354
------------------	-------------	------------------------

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

Name of Employer HFF	Occupation REAL ESTATE
-------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA12.725875.1.0215

Amount of Each Receipt this Period

240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. PAUL C. AUGHTRY III
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 16449

City GREENVILLE	State SC	Zip Code 29606-7449
--------------------	-------------	------------------------

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

Name of Employer WINDSOR/AUGHTRY CO.	Occupation COMMERCIAL REAL ESTATE DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2015

Transaction ID : SA12.724599.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JAMES P. BACKLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2406 DOMINION DRIVE

City FREDERICK	State MD	Zip Code 21702-3172
-------------------	-------------	------------------------

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

Name of Employer CHRISTIAN COALITION OF AMERICA	Occupation FAMILY ISSUES CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : SA12.725309.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. THOMAS M. BAGWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4705 LELAND DRIVE

City CUMMING	State GA	Zip Code 30041-3991
-----------------	-------------	------------------------

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

Name of Employer AMERICAN PROTEINS, INC.	Occupation OWNER
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA12.723960.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DAVID L. BAHNSEN
Full Name (Last, First, Middle Initial)
Mailing Address 111 VIA ZURICH

City NEWPORT BEACH	State CA	Zip Code 92663-5538
FEC ID number of contributing federal political committee. C		
Name of Employer THE BAHNSEN GROUP	Occupation WEALTH ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
02 / 23 / 2015
Transaction ID : SA12.725359.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. KEVIN BAINES
Full Name (Last, First, Middle Initial)
Mailing Address 2275 HUNTINGTON DRIVE, BOX 219

City SAN MARINO	State CA	Zip Code 91108-2640
FEC ID number of contributing federal political committee. C		
Name of Employer CAL TECH	Occupation RESEARCHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
01 / 27 / 2015
Transaction ID : SA12.724032.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. JENNIFER J. BAIRD
Full Name (Last, First, Middle Initial)
Mailing Address 637 S. 25TH STREET

City ARLINGTON	State VA	Zip Code 22202-2529
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
02 / 03 / 2015
Transaction ID : SA12.724348.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. THOMAS W. BALDERSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1972 THATCH PALM DRIVE
 City BOCA RATON State FL Zip Code 33432-7457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725722.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. TODD W. BALDREE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 PRISTINE DRIVE
 City GREER State SC Zip Code 29650-4464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEVEL ONE Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724067.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. PAUL M. BARRETT
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE BEACON STREET
 City BOSTON State MA Zip Code 02108-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DONOGHUE, BARRETT & SINGAL Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725840.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. ALAN C. BAUM
Full Name (Last, First, Middle Initial)

Mailing Address 651 BERING DRIVE
UNIT 2001

City HOUSTON State TX Zip Code 77057-2136

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

Name of Employer TEXAS EYE INSTITUTE Occupation OPHTHALMOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2015

Transaction ID : SA12.724351.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. WAYNE L. BERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3055 WHITEHAVEN ST. NW

City WASHINGTON State DC Zip Code 20008-3613

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

Name of Employer THE BLACKSTONE GROUP Occupation SENIOR ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2015

Transaction ID : SA12.724198.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. JULIE L. BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 14 ORCHARD AVENUE

City SAUGUS State MA Zip Code 01906-3267

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA12.725826.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ALBERT BEZJIAN
Full Name (Last, First, Middle Initial)

Mailing Address 401 NOLAN ROAD

City WALES State MI Zip Code 48027-4406

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA12.724007.1.0215

Amount of Each Receipt this Period
 750.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. TERRY BEZJIAN
Full Name (Last, First, Middle Initial)

Mailing Address 401 NOLAN ROAD

City WALES State MI Zip Code 48027-4406

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA12.724005.1.0215

Amount of Each Receipt this Period
 750.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. CARRIE F. BLADES
Full Name (Last, First, Middle Initial)

Mailing Address 12007 TALL HAVEN LANE

City CYPRESS State TX Zip Code 77433-3183

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA12.725569.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT K. BLAISDELL
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE BEACON ST
 City BOSTON State MA Zip Code 02108-3107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DONOGHUE, BARRET, & SINGAL Occupation EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA12.725841.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DOMINIC T. BODENSTEINER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4912 34TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 20 / 2015**
Transaction ID : SA12.725306.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. BRIAN BOUDREAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 26885 MULHOLLAND HWY.
 City CALABASAS State CA Zip Code 91302-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MALIBU VALLEY FARMS Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **01 / 31 / 2015**
Transaction ID : SA12.724544.1.0215
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. MIA BOUDREAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 26885 MULHOLLAND HWY.
 City CALABASAS State CA Zip Code 91302-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 01 / 31 / 2015
Transaction ID : SA12.724533.1.0215
 Amount of Each Receipt this Period: 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. BILL L. BOWLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 SEA ISLAND DRIVE
 City GEORGETOWN State SC Zip Code 29440-7261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 27 / 2015
Transaction ID : SA12.724055.1.0215
 Amount of Each Receipt this Period: 4920.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. TANIS B. BOWLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 SEA ISLAND DR
 City GEORGETOWN State SC Zip Code 29440-7261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 27 / 2015
Transaction ID : SA12.724054.1.0215
 Amount of Each Receipt this Period: 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN C. BRADY
Full Name (Last, First, Middle Initial)

Mailing Address 712 THE STRAND

City State Zip Code
MANHATTAN BEACH CA 90266-5656

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

Name of Employer Occupation
OAKTREE CAPITAL MANAGEMENT MANAGING DIRECTOR & PORTFOLIO MAN/

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2015

Transaction ID : SA12.724535.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT S. BREWER
Full Name (Last, First, Middle Initial)

Mailing Address 100 HARBOR DRIVE #3604

City State Zip Code
SAN DIEGO CA 92101-6889

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

Name of Employer Occupation
SELF-EMPLOYED LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724035.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JOHN F. BROCK III
Full Name (Last, First, Middle Initial)

Mailing Address 88 W. PACES FERRY ROAD NW UNIT 110

City State Zip Code
ATLANTA GA 30305-1444

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

Name of Employer Occupation
COCA-COLA ENTERPRISES CHAIRMAN & C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015

Transaction ID : SA12.724249.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. MARY R. BROCK
Full Name (Last, First, Middle Initial)

Mailing Address 88 W. PACES FERRY ROAD NW UNIT 110

City ATLANTA	State GA	Zip Code 30305-1444
-----------------	-------------	------------------------

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

Name of Employer ATLANTA DREAM	Occupation CO-OWNER
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA12.724244.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HENRY T. BROOKS
Full Name (Last, First, Middle Initial)

Mailing Address 15 MAYMONT WAY

City THE WOODLANDS	State TX	Zip Code 77382-1328
-----------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA12.725823.1.0215

Amount of Each Receipt this Period

3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JERALD BROOKS
Full Name (Last, First, Middle Initial)

Mailing Address 2616 20TH STREET N. #101

City BIRMINGHAM	State AL	Zip Code 35234-1010
--------------------	-------------	------------------------

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

Name of Employer STAR TRUCK PARTS	Occupation BUSINESS OWNER
--------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1860.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA12.724202.1.0215

Amount of Each Receipt this Period

1860.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JAMES S. BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 3691 VIA MERCADO #12

City LAMESA	State CA	Zip Code 91941-8327
----------------	-------------	------------------------

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

Name of Employer SILBERRAD, INC.	Occupation PRESIDENT
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724030.1.0215

Amount of Each Receipt this Period
1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. ROBERT BUIE
Full Name (Last, First, Middle Initial)

Mailing Address PO8365

City RANCHO SANTA FE	State CA	Zip Code 92067-
-------------------------	-------------	--------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA12.723911.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT BUIE
Full Name (Last, First, Middle Initial)

Mailing Address 11260 EL CAMINO REAL

City SAN DIEGO	State CA	Zip Code 92130-2676
-------------------	-------------	------------------------

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

Name of Employer BUIE STODARD GROUP	Occupation CEO/PRESIDENT
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA12.724877.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DAVID BURSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address INFO REQUESTED

City INFO REQUESTED State XX Zip Code 99999-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724578.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL I. BURSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 11600 WASHINGTON PLACE STE. 104

City LOS ANGELES State CA Zip Code 90066-5000

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

Name of Employer BURSTEIN LAW FIRM Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2015
Transaction ID : SA12.723763.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. KELLY BURT
Full Name (Last, First, Middle Initial)

Mailing Address 14385 CIERA CT

City POWAY State CA Zip Code 92064-6627

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

Name of Employer PRIDE SELF STORAGE Occupation PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724046.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 74 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MICHAEL A. CALABRESE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1136 5TH AVENUE APT. 8C
 City NEW YORK State NY Zip Code 10128-0122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOCKTON COMPANIES Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 18 / 2015
Transaction ID : SA12.724879.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. MICHAEL CALLUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 EULOW STREET
 City SWAMPSCOTT State MA Zip Code 01907-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STEWARD PHYSICIAN NETWORK/ Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725827.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ALBERTO R. CARDENAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1441 BRICKELL AVE STE 1500
 City MIAMI State FL Zip Code 33131-3430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDENS PARTNERS, LLC Occupation LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724056.1.0215
 Amount of Each Receipt this Period 1200.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MS. VIVIAN CARDIA		Date of Receipt MM / DD / YYYY 01 / 23 / 2015 Transaction ID : SA12.723939.1.0215
Mailing Address 860 UNITED NATIONS PLAZA APT. 12C		Amount of Each Receipt this Period 300.00
City NEW YORK	State NY	Zip Code 10017-1815
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer SELF-EMPLOYED	Occupation SELF-EMPLOYED	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. MR. CHALMERS R. CARR III		Date of Receipt MM / DD / YYYY 01 / 27 / 2015 Transaction ID : SA12.724063.1.0215
Mailing Address 722 OLD PLANK ROAD		Amount of Each Receipt this Period 5000.00
City RIDGE SPRING	State SC	Zip Code 29129-9550
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer TITAN FARMS	Occupation AGRIBUSINESS OWNER	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. MRS. JUSTINE M. CARR		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA12.725832.1.0215
Mailing Address 935 HAMMOND STREET		Amount of Each Receipt this Period 600.00
City CHESTNUT HILL	State MA	Zip Code 02467-2703
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer STEWARD HEALTH CARE	Occupation PHYSICIAN	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. LORI ANNE CARR
Full Name (Last, First, Middle Initial)
Mailing Address 722 OLD PLANK ROAD
City RIDGE SPRING State SC Zip Code 29129-9550
FEC ID number of contributing federal political committee. **C**
Name of Employer TITAN FARMS Occupation AGRIBUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724060.1.0215
Amount of Each Receipt this Period 5000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT CARROLL
Full Name (Last, First, Middle Initial)
Mailing Address 2241 CENTURY HILL
City LOS ANGELES State CA Zip Code 90067-3506
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 26 / 2015
Transaction ID : SA12.724006.1.0215
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. BRIAN T. CARTY
Full Name (Last, First, Middle Initial)
Mailing Address 301 BERKELEY STREET APT. 2A
City BOSTON State MA Zip Code 02116-2002
FEC ID number of contributing federal political committee. **C**
Name of Employer STEWARD HEALTH CARE LLC Occupation CHIEF MARKETING OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725833.1.0215
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 77 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN CATSIMATIDIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 817 FIFTH AVENUE
 City NEW YORK State NY Zip Code 10065-7254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RED APPLE GROUP Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723929.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. MARGO CATSIMATIDIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 817 5TH AVENUE
 City NEW YORK State NY Zip Code 10065-7254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GRISTEDES Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723930.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MICHAEL S. CHAE
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 PARK AVENUE
 City NEW YORK State NY Zip Code 10154-0004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLACKSTONE GROUP Occupation INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA12.724683.1.0215
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JEFFREY F. CHASE-LUBITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 LAUREL AVENUE
 City State Zip Code
 PROVIDENCE RI 02906-4622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DONOGHUE, BARRETT & SINGAL ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA12.725836.1.0215
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ARTHUR B. CHOATE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1390 S. DIXIE HIGHWAY STE. 2221
 City State Zip Code
 CORAL GABLES FL 33146-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724059.1.0215
 Amount of Each Receipt this Period
 4800.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. M. C. CHRISTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6915 TURF DRIVE
 City State Zip Code
 HUNTINGTON BEACH CA 92648-1545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DOTY BROS. EQUIPMENT PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA12.725873.1.0215
 Amount of Each Receipt this Period
 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. REBECA CHRISTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6915 TURF DRIVE
 City HUNTINGTON BEACH State CA Zip Code 92648-1545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MERNEL GROUP Occupation SENIOR VICE PRESIDENT RISK MANAGEMEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725878.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. CHINH E. CHU
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 PARK AVENUE 31ST FLOOR
 City NEW YORK State NY Zip Code 10154-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BLACKSTONE GROUP Occupation SENIOR MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA12.724682.1.0215
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. GREGORY A. CIONGOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 GREYLOCK ROAD
 City WELLESLEY State MA Zip Code 02481-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BAUPOST GROUP Occupation FINANCIAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3240.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725561.1.0215
 Amount of Each Receipt this Period 3240.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. GEORGE J. CLAIRMONT
 Full Name (Last, First, Middle Initial)
 Mailing Address 237 PROSPECT STREET
 City NORWELL State MA Zip Code 02061-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COMPASS MEDICAL GROUP Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725837.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ERNEST H. COCKRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 MAIN STREET STE. 3250
 City HOUSTON State TX Zip Code 77002-6338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COCKRELL INTERESTS Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA12.725319.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. JANET S. COCKRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 MAIN STREET STE. 3250
 City HOUSTON State TX Zip Code 77002-6338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA12.725316.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. JOEL S. COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 4826 BRAES VALLEY

City HOUSTON State TX Zip Code 77096-1718

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA12.725558.1.0215

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. THOMAS E. CONSTANCE
Full Name (Last, First, Middle Initial)

Mailing Address 1177 AVENUE OF AMERICAS

City NEW YORK State NY Zip Code 10036-2714

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

Name of Employer KRAMER LEVINE Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA12.723934.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. HARRY G. COOPER
Full Name (Last, First, Middle Initial)

Mailing Address 939 COAST BLVD. #10AF

City LAJOLLA State CA Zip Code 92037-4118

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

Name of Employer COLLEGE SOURCE INC. Occupation COMPUTER SOFTWARE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA12.724917.1.0215

Amount of Each Receipt this Period
 780.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. VALERIE S. COOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 939 COAST BLVD. #10AF
 City LAJOLLA State CA Zip Code 92037-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COLLEGE SOURCE INC. Occupation COMPUTER SOFTWARE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt **02 / 18 / 2015**
Transaction ID : SA12.724910.1.0215
 Amount of Each Receipt this Period **780.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ALFONSO G. CORDERO
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 6240
 City STATELINE State NV Zip Code 89449-6240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt **01 / 31 / 2015**
Transaction ID : SA12.724509.1.0215
 Amount of Each Receipt this Period **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. MERCY B. CORDERO
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 6240
 City STATELINE State NV Zip Code 89449-6240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt **01 / 31 / 2015**
Transaction ID : SA12.724521.1.0215
 Amount of Each Receipt this Period **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 83 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. MEGHAN COX
Full Name (Last, First, Middle Initial)
Mailing Address 6533 N. 7TH AVENUE #23

City PHOENIX	State AZ	Zip Code 85013-1143
-----------------	-------------	------------------------

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

Name of Employer LINCOLN STRATEGY GROUP	Occupation CONSULTANT
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SA12.725462.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. JENNY CRAIG
Full Name (Last, First, Middle Initial)
Mailing Address 11601 WILSHIRE BLVD., STE, 1840

City LOS ANGELES	State CA	Zip Code 90025-1754
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724028.1.0215

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MOISES G. CROITORU
Full Name (Last, First, Middle Initial)
Mailing Address 241 GOLDEN BEACH DRIVE

City GOLDEN BEACH	State FL	Zip Code 33160-2224
----------------------	-------------	------------------------

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

Name of Employer PASSION GROWERS LLC	Occupation OPERATIONS MANAGER
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723795.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. AMY E. D'AGOSTINO
Full Name (Last, First, Middle Initial)

Mailing Address 1301 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10019-6022
------------------	-------------	------------------------

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

Name of Employer CHADBOURNE & PARK	Occupation LAWYER
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA12.723936.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. MARK H. DALZELL
Full Name (Last, First, Middle Initial)

Mailing Address 1289 SKYLINE DRIVE

City LAGUNA BEACH	State CA	Zip Code 92651-1938
----------------------	-------------	------------------------

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

Name of Employer CAPITAL GROUP OF COMPANIES	Occupation PORTFOLIO MANAGER
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724579.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MARK E. DANIELS
Full Name (Last, First, Middle Initial)

Mailing Address 118 HOLBROOK TRAIL

City GREENVILLE	State SC	Zip Code 29605-3163
--------------------	-------------	------------------------

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

Name of Employer TITAN CTS	Occupation CEO
-------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724065.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. SARAH D. DANIELS
Full Name (Last, First, Middle Initial)
Mailing Address 118 HOLBROOK TRAIL

City GREENVILLE State SC Zip Code 29605-3163

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt: **01 / 27 / 2015**
Transaction ID : **SA12.724080.1.0215**

Amount of Each Receipt this Period: **600.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DR. GLENN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 11 LEGATO WAY

City THE WOODLANDS State TX Zip Code 77382-2072

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

Name of Employer: **SELF-EMPLOYED** Occupation: **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt: **02 / 25 / 2015**
Transaction ID : **SA12.725559.1.0215**

Amount of Each Receipt this Period: **1500.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. GUILLERMO DE LA VINA
Full Name (Last, First, Middle Initial)
Mailing Address 13291 RALSTON AVENUE

City SYLMAR State CA Zip Code 91342-1255

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

Name of Employer: **SIGUE CORPORATION** Occupation: **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt: **01 / 31 / 2015**
Transaction ID : **SA12.724516.1.0215**

Amount of Each Receipt this Period: **1560.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 86 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. TIRSO DEL JUNCO SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 E. UNION STREET
 SUITE 120
 City PASADENA State CA Zip Code 91106-1756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724570.1.0215
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. SCOTT D. DELACOURT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1527 N. RANDOLPH STREET
 City ARLINGTON State VA Zip Code 22207-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : SA12.725311.1.0215
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. RALPH DELATORRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 HOWLAND ROAD
 City NEWTON State MA Zip Code 02465-2938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STEWARD HEALTH CARE Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA12.725817.1.0215
 Amount of Each Receipt this Period
 2100.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JACK C. DEMETREE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 47050

City JACKSONVILLE	State FL	Zip Code 32247-7050
FEC ID number of contributing federal political committee. C		
Name of Employer DEMETREE BROTHERS	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4560.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015
Transaction ID : SA12.724242.1.0215

Amount of Each Receipt this Period
4800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JACK C. DEMETREE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 47050

City JACKSONVILLE	State FL	Zip Code 32247-7050
FEC ID number of contributing federal political committee. C		
Name of Employer DEMETREE BROTHERS	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4560.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015
Transaction ID : SA12.724248.1.0215

Amount of Each Receipt this Period
4560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JAY C. DEMETREE JR.
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 47050

City JACKSONVILLE	State FL	Zip Code 32247-7050
FEC ID number of contributing federal political committee. C		
Name of Employer DEMETREE BROTHERS INC.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015
Transaction ID : SA12.724241.1.0215

Amount of Each Receipt this Period
4800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. OSCAR DEOCA SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 907 GLENVISTA DRIVE
 City GLENDALE State CA Zip Code 91206-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEOCA MOTORS Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 31 / 2015**
Transaction ID : SA12.724524.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. MOUNANG P. DESAI
 Full Name (Last, First, Middle Initial)
 Mailing Address 6003 ISLA VISTA
 City HOUSTON State TX Zip Code 77041-6057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **02 / 25 / 2015**
Transaction ID : SA12.725566.1.0215
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. PAULA DOVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 644 W. 51ST TERRACE
 City MIAMI BEACH State FL Zip Code 33140-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DARNEL, INC. Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **01 / 16 / 2015**
Transaction ID : SA12.723765.1.0215
 Amount of Each Receipt this Period **750.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 89 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. JOAN S. ELLER
Full Name (Last, First, Middle Initial)

Mailing Address 2225 E. GEORGIA AVENUE

City PHOENIX State AZ Zip Code 85016-3512

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

Name of Employer RED RIVER RESOURCES, INC. Occupation VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA12.725299.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. BENJAMIN ENGLANDER
Full Name (Last, First, Middle Initial)

Mailing Address 806 CENTRAL AVENUE

City WOODMERE State NY Zip Code 11598-2641

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

Name of Employer ROSCO INC. Occupation VICE PRESIDENT ENGINEERING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : SA12.724663.1.0215

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MARK ESCUDE II
Full Name (Last, First, Middle Initial)

Mailing Address 105 PUTNEY BRIDGE LANE

City SIMPSONVILLE State SC Zip Code 29681-3658

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

Name of Employer MCE AUTOMOTIVE Occupation PLATFORM DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724057.1.0215

Amount of Each Receipt this Period
 3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 90 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MARK C. ESCUDE
Full Name (Last, First, Middle Initial)

Mailing Address 100 PUTNEY BRIDGE LANE

City SIMPSONVILLE State SC Zip Code 29681-3658

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

Name of Employer SELF-EMPLOYED Occupation AUTO DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724070.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. SHERYL C. ESCUDE
Full Name (Last, First, Middle Initial)

Mailing Address 100 PUTNEY BRIDGE LANE

City SIMPSONVILLE State SC Zip Code 29681-3658

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724053.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JASON FANE
Full Name (Last, First, Middle Initial)

Mailing Address 10 ROCKEFELLER PLAZA

City NEW YORK State NY Zip Code 10020-1903

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

Name of Employer FAWE ORGANIZATION Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA12.723953.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. LOURDES M. FANJUL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N. CLEMATIS STREET STE. 200
 City WEST PALM BEACH State FL Zip Code 33401-5551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt: **12 / 10 / 2014**
Transaction ID : SA12.722357.1.0215
 Amount of Each Receipt this Period: **1880.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. PETER C. FARRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7220 ROMERO DRIVE
 City LAJOLLA State CA Zip Code 92037-5633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RESMED** Occupation: **CHAIRMAN & FOUNDER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1560.00**

Date of Receipt: **02 / 18 / 2015**
Transaction ID : SA12.724874.1.0215
 Amount of Each Receipt this Period: **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. DAVID L. FEAVEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6222 LUPTON DR
 City DALLAS State TX Zip Code 75225-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **EXL PETROLEUM** Occupation: **OWNER/PARTNER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1620.00**

Date of Receipt: **02 / 13 / 2015**
Transaction ID : SA12.724820.1.0215
 Amount of Each Receipt this Period: **1620.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. MICHELLE A. FEAVEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6222 LUPTON DR
 City DALLAS State TX Zip Code 75225-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)

Date of Receipt 02 / 13 / 2015
Transaction ID : SA12.724818.1.0215
 Amount of Each Receipt this Period 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. PAUL S. FEIRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2437 N. OTTAWA STREET
 City ARLINGTON State VA Zip Code 22205-2112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ARNOLD & PORTER LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify)

Date of Receipt 02 / 10 / 2015
Transaction ID : SA12.724688.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JORGE FELIX
 Full Name (Last, First, Middle Initial)
 Mailing Address 560 N. STATE STREET
 City OREM State UT Zip Code 84057-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EL MEXICANO MARKET, INC. Occupation PRESIDENT
 Receipt For: Primary General Other (specify)

Date of Receipt 02 / 23 / 2015
Transaction ID : SA12.725410.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 93 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SAMUEL J. FERRARA
Full Name (Last, First, Middle Initial)

Mailing Address 6071 NW 69TH WAY

City PARKLAND State FL Zip Code 33067-1339

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

Name of Employer PASSION GROWERS Occupation SALES & MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015

Transaction ID : SA12.723796.1.0215

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT FINIZIO
Full Name (Last, First, Middle Initial)

Mailing Address 17551 GRAND ESTE WAY

City BOCA RATON State FL Zip Code 33496-1051

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

Name of Employer THERAPEUTICS M.D. Occupation CHIEF EXECUTIVE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2015

Transaction ID : SA12.725620.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JASON MATTHEW FLEMMING
Full Name (Last, First, Middle Initial)

Mailing Address 2318 BERMUDA HILLS ROAD

City COLUMBIA State SC Zip Code 29223-6806

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

Name of Employer MIDLAND AGENCY INSURANCE Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724075.1.0215

Amount of Each Receipt this Period
 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CARL A. FORNARIS
Full Name (Last, First, Middle Initial)
Mailing Address 12280 SW 69 PLACE
City MIAMI State FL Zip Code 33156-5434
FEC ID number of contributing federal political committee. **C**
Name of Employer GREENBERG TRAURIG Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA12.725317.1.0215
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HOLLOWAY FROST
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 667
City HOUSTON State TX Zip Code 77001-0667
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725819.1.0215
Amount of Each Receipt this Period 1560.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JOSE A. FUENTES AGOSTINI
Full Name (Last, First, Middle Initial)
Mailing Address 750 9TH STREET NW SUITE 750
City WASHINGTON State DC Zip Code 20001-4589
FEC ID number of contributing federal political committee. **C**
Name of Employer EARPORT STRATEGIES, L.L.C. Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA12.725308.1.0215
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROY D. FUGAZY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 AVENUE OF THE AMERICAS
 City NEW YORK State NY Zip Code 10020-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FUGAZY INTERNATIONAL Occupation TRAVEL & TRANSPORTATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : SA12.724881.1.0215
 Amount of Each Receipt this Period
 450.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL V. FURBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7877 LOOKOUT DRIVE
 City LA JOLLA State CA Zip Code 92037-3951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MARATHON CONSTRUCTION Occupation CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724045.1.0215
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. KAREN GABRIEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1760 VOORHEES AVENUE
 City MANHATTAN BEACH State CA Zip Code 90266-7046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724536.1.0215
 Amount of Each Receipt this Period
 900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. BERTA M. GAVINA
Full Name (Last, First, Middle Initial)
Mailing Address 4701 LAS COLINAS LANE

City LA CANADA	State CA	Zip Code 91011-2319
-------------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724586.1.0215

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOSE GAVINA
Full Name (Last, First, Middle Initial)
Mailing Address 170 PATRICIAN WAY

City PASADENA	State CA	Zip Code 91105-1024
------------------	-------------	------------------------

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

Name of Employer F. GAVINA & SONS INC.	Occupation HEAD OF SALES
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724576.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. PEDRO L. GAVINA
Full Name (Last, First, Middle Initial)
Mailing Address 4701 LAS COLINAS LANE

City LA CANADA	State CA	Zip Code 91011-2319
-------------------	-------------	------------------------

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

Name of Employer F. GAVINA & SONS	Occupation C.E.O.
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724600.1.0215

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BRAD GERTSMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1044 NORTHERN BLVD. STE. 305

City ROSLYN	State NY	Zip Code 11576-1589
----------------	-------------	------------------------

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

Name of Employer GOTHAM GOVERNMENT RELATIONS LLC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA12.724897.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. DAN GIANFALLA
Full Name (Last, First, Middle Initial)

Mailing Address 823 11TH AVENUE

City NEW YORK	State NY	Zip Code 10019-3557
------------------	-------------	------------------------

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

Name of Employer UNITED METRO ENERGY CORPORATION	Occupation PRESIDENT & C.E.O.
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA12.723916.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. HARPAUL GILL
Full Name (Last, First, Middle Initial)

Mailing Address 16 VERSANTE COURT

City HOUSTON	State TX	Zip Code 77070-6035
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA12.725560.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 98 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. FRANK PHILLIPS GILTNER III
 Full Name (Last, First, Middle Initial)
 Mailing Address 5341 N. 46TH STREET
 City PHOENIX State AZ Zip Code 85018-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SHAMROCK FOODS COMPANY Occupation SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725594.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. RENEE V. GILTNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5341 N. 46TH STREET
 City PHOENIX State AZ Zip Code 85018-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725585.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MARK J. GIRARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 CROWN WAY
 City MARBLEHEAD State MA Zip Code 01945-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STEWARD HEALTH CARE Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725831.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. GUILLERMO G. GODOY
Full Name (Last, First, Middle Initial)
Mailing Address 1364 DOWNING RIDGE

City TUSCALOOSA	State AL	Zip Code 35406-3642
FEC ID number of contributing federal political committee. C		
Name of Employer TUSCALOOSA NEWBORN MEDICINE	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015
Transaction ID : SA12.724201.1.0215

Amount of Each Receipt this Period
900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. STEVE GOGGANS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2025

City PAWLEYS ISLAND	State SC	Zip Code 29585-2025
FEC ID number of contributing federal political committee. C		
Name of Employer SGA ARCHITECTURE	Occupation ARCHITECT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015
Transaction ID : SA12.724066.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MARC S. GOLDMAN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 8020

City GARDEN CITY	State NY	Zip Code 11530-8020
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2015
Transaction ID : SA12.723811.1.0215

Amount of Each Receipt this Period
2100.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DANIEL GONZALEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 N. MONROE STREET #303

City ARLINGTON	State VA	Zip Code 22207-3873
-------------------	-------------	------------------------

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

Name of Employer MERCURY	Occupation CONSULTANT
-----------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA12.725870.1.0215

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. RAMON GONZALEZ JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 597 N. ALTA VISTA AVENUE

City MONROVIA	State CA	Zip Code 91016-1630
------------------	-------------	------------------------

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

Name of Employer IMPORT GLASS CORPORATION	Occupation VICE PRESIDENT
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724510.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. GREGORY GORMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5591 PEACHTREE ROAD

City CHAMBLEE	State GA	Zip Code 30341-2309
------------------	-------------	------------------------

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

Name of Employer SOUTHERN SITE DEVELOPMENT LLC	Occupation C.E.O.
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015
Transaction ID : SA12.723802.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 101 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. NOAH GOTTDIENER
Full Name (Last, First, Middle Initial)

Mailing Address 239 E. 61ST STREET

City NEW YORK State NY Zip Code 10065-8203

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

Name of Employer DUFF & PHELPS Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723942.1.0215

Amount of Each Receipt this Period 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. GEORGE GOULD
Full Name (Last, First, Middle Initial)

Mailing Address 3525 DEL MAR HEIGHTS RD., #367

City SAN DIEGO State CA Zip Code 92130-2199

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3960.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724512.1.0215

Amount of Each Receipt this Period 3960.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. LAWRENCE D. GREENBERG
Full Name (Last, First, Middle Initial)

Mailing Address 4 NOTTINGHAM LANE

City WESTON State MA Zip Code 02493-1344

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

Name of Employer ALYDIR CAPITAL Occupation MONEY MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725715.1.0215

Amount of Each Receipt this Period 1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. MARILYN GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 44 KEMP ROAD E.
City GREENSBORO State NC Zip Code 27410-6016
FEC ID number of contributing federal political committee. **C**
Name of Employer MARILYN'S AGENCY Occupation BUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt **01 / 16 / 2015**
Transaction ID : SA12.723774.1.0215
Amount of Each Receipt this Period 120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. MARILYN GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 44 KEMP ROAD E.
City GREENSBORO State NC Zip Code 27410-6016
FEC ID number of contributing federal political committee. **C**
Name of Employer MARILYN'S AGENCY Occupation BUSINESS OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt **02 / 10 / 2015**
Transaction ID : SA12.724684.1.0215
Amount of Each Receipt this Period 120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. T. MICHAEL GREER
Full Name (Last, First, Middle Initial)
Mailing Address 16 DOLPHIN POND LANE
City FOUNTAIN INN State SC Zip Code 29644-9005
FEC ID number of contributing federal political committee. **C**
Name of Employer PINNACLE COATING Occupation MANAGEMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 29 / 2015**
Transaction ID : SA12.724245.1.0215
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DAVID GREINER
Full Name (Last, First, Middle Initial)

Mailing Address 4708 CAROLINE STREET

City HOUSTON State TX Zip Code 77004-5025

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : SA12.725312.1.0215

Amount of Each Receipt this Period
1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HOWARD D. GROFF
Full Name (Last, First, Middle Initial)

Mailing Address 9832 CALVIN AVENUE

City NORTHRIDGE State CA Zip Code 91324-1619

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

Name of Employer NORTHWEST EXCAVATING COMPANY, INC. Occupation CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724031.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. SUSAN L. GROFF
Full Name (Last, First, Middle Initial)

Mailing Address 9832 CALVIN AVENUE

City NORTHRIDGE State CA Zip Code 91324-1619

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

Name of Employer NORTHWEST EXCAVATING COMPANY INC. Occupation CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724037.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 104 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. JAY D. GRUSHKIN
Full Name (Last, First, Middle Initial)

Mailing Address ONE CHASE PLAZA

City NEW YORK State NY Zip Code 10005-

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

Name of Employer MILBANK, TWEED, HADLEY & MCCLOY LLP Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA12.723922.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HERBERT W. GULLQUIST
Full Name (Last, First, Middle Initial)

Mailing Address 530 COCONUT PALM RD

City VERO BEACH State FL Zip Code 32963-3711

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

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA12.724898.1.0215

Amount of Each Receipt this Period
1900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MARCO GUTT
Full Name (Last, First, Middle Initial)

Mailing Address 1082 NE 87 STREET

City MIAMI State FL Zip Code 33138-3470

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

Name of Employer PASSION GROWERS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2015

Transaction ID : SA12.723767.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SCOTT T. HAIG
Full Name (Last, First, Middle Initial)
Mailing Address 7 TRINITY COURT

City WELLESLEY	State MA	Zip Code 02481-2531
FEC ID number of contributing federal political committee. C		
Name of Employer BAUPOST GROUP	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
02 / 27 / 2015
Transaction ID : SA12.725716.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JEFFREY HAINES
Full Name (Last, First, Middle Initial)
Mailing Address 241 N. ROCKINGHAM AVENUE

City LOS ANGELES	State CA	Zip Code 90049-2633
FEC ID number of contributing federal political committee. C		
Name of Employer OVATION MEDICAL	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
01 / 31 / 2015
Transaction ID : SA12.724530.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. GILBERT HAROCHE
Full Name (Last, First, Middle Initial)
Mailing Address 781 5TH AVENUE

City NEW YORK	State NY	Zip Code 10022-1092
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
01 / 23 / 2015
Transaction ID : SA12.723947.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ADAM HASNER
Full Name (Last, First, Middle Initial)

Mailing Address 17100-5 BOCA CLUB BLVD.

City BOCA RATON	State FL	Zip Code 33487-1256
--------------------	-------------	------------------------

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

Name of Employer PEOPLE'S TRUST INSURANCE	Occupation CHIEF MARKETING OFFICER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2015

Transaction ID : SA12.723813.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. JILLIAN HASNER
Full Name (Last, First, Middle Initial)

Mailing Address 17100-5 BOCA CLUB BLVD.

City BOCA RATON	State FL	Zip Code 33487-1256
--------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation CONSULTANT
-----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2015

Transaction ID : SA12.723812.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. W. THOMAS HAYNES
Full Name (Last, First, Middle Initial)

Mailing Address 540 SLANE TRACE

City ROSWELL	State GA	Zip Code 30076-4455
-----------------	-------------	------------------------

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

Name of Employer HLBA	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2015

Transaction ID : SA12.723737.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 107 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. W. THOMAS HAYNES
Full Name (Last, First, Middle Initial)
Mailing Address 540 SLANE TRACE

City ROSWELL	State GA	Zip Code 30076-4455
-----------------	-------------	------------------------

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

Name of Employer HLBA	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2015

Transaction ID : SA12.724008.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. GEORGE KENNETH HEEBNER
Full Name (Last, First, Middle Initial)
Mailing Address 53 MOUNT VERNON STREET

City BOSTON	State MA	Zip Code 02108-1300
----------------	-------------	------------------------

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

Name of Employer CAPITAL GROWTH MANAGEMENT LP	Occupation PORTFOLIO MANAGER
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA12.725354.1.0215

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. KEN B. HEITHOFF M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 4911 FISHER ISLAND DRIVE

City MIAMI BEACH	State FL	Zip Code 33109-0183
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA12.724199.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SANTIAGO HERNANDEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 13521 NORRIS AVENUE
 City SYLMAR State CA Zip Code 91342-1240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724528.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MS. CATHI HERROD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4436 E. CAMELBACK #38
 City PHOENIX State AZ Zip Code 85018-2833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CENTER FOR AZ POLICY Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725578.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ROGER HERTOG
 Full Name (Last, First, Middle Initial)
 Mailing Address 745 5TH AVE FL 14
 City NEW YORK State NY Zip Code 10151-0099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA12.725813.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DOUGLAS J. HERTZ
Full Name (Last, First, Middle Initial)

Mailing Address 3741 PACES VALLEY ROAD NW

City ATLANTA State GA Zip Code 30327-3207

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

Name of Employer UNITED DISTRIBUTOR, INC. Occupation PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA12.723959.1.0215

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. DONNA R. HICKS
Full Name (Last, First, Middle Initial)

Mailing Address 11376 CARIBBEAN LANE

City SCOTTSDALE State AZ Zip Code 85255-8945

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

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA12.725580.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. LARKIN HICKS
Full Name (Last, First, Middle Initial)

Mailing Address 11376 CARIBBEAN LANE

City SCOTTSDALE State AZ Zip Code 85255-8945

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA12.725592.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 110 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CHARLES R. HOLMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1324 THE STRAND
 City State Zip Code
 MANHATTAN BEACH CA 90266-4742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED MANAGEMENT CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724043.1.0215
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. HERBERT L. HOLTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 WASHINGTON ST
 APT 313
 City State Zip Code
 WEST NEWTON MA 02465-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA12.725825.1.0215
 Amount of Each Receipt this Period
 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. DAVID L. HOROWITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 27241 LA PAZ ROAD
 SUITE B.
 City State Zip Code
 LAGUNA NIGUEL CA 92677-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOROWITZ GROUP CEO & CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2015
Transaction ID : SA12.723496.1.0215
 Amount of Each Receipt this Period
 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 111 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DAVID L. HOROWITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 27241 LA PAZ ROAD
 SUITE B.
 City LAGUNA NIGUEL State CA Zip Code 92677-3636
 Name of Employer HOROWITZ GROUP Occupation CEO & CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 01 / 09 / 2015
Transaction ID : SA12.723529.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MONZER HOURANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7670 WOODWAY
 SUITE 160
 City HOUSTON State TX Zip Code 77063-1593
 Name of Employer MEDISTAR CORPORATION Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725555.1.0215
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JOHN W. HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1527
 City RANCHO SANTA FE State CA Zip Code 92067-1527
 Name of Employer J. W. HOWARD & ASSOCIATES Occupation LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724034.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. IGNACIO HUERTAS
Full Name (Last, First, Middle Initial)
Mailing Address 3104 NE 210TH TERRACE

City AVENTURA	State FL	Zip Code 33180-3910
FEC ID number of contributing federal political committee. C		
Name of Employer VIDALGO.COM LLC	Occupation CTO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Date of Receipt
01 / 19 / 2015
Transaction ID : SA12.723806.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. DANIEL HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 4216 ALTA VISTA COURT

City OCEANSIDE	State CA	Zip Code 92057-7531
FEC ID number of contributing federal political committee. C		
Name of Employer COAST ENVIRONMENTAL INC.	Occupation PRESIDENT & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
01 / 27 / 2015
Transaction ID : SA12.724044.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. PHILLIP R. HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1177

City GREENVILLE	State SC	Zip Code 29602-1177
FEC ID number of contributing federal political committee. C		
Name of Employer HUGHES INVESTMENTS	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
01 / 31 / 2015
Transaction ID : SA12.724598.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ANTONIO IBARRIA
Full Name (Last, First, Middle Initial)

Mailing Address 6050 KENNEDY BLVD E.
APARTMENT 5G

City WEST NEW YORK State NJ Zip Code 07093-3932

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

Name of Employer EL ESPECIAL/USA DISTRIBUTORS Occupation PUBLISHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 19 / 2015

Transaction ID : SA12.723790.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ERIC INSUA
Full Name (Last, First, Middle Initial)

Mailing Address 9121 GLENDALES BLVD.

City SUN VALLEY State CA Zip Code 91352-

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

Name of Employer INSUA GRAPHICS, INC. Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2015

Transaction ID : SA12.724514.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JAMES D. JAMESON
Full Name (Last, First, Middle Initial)

Mailing Address 1650 CAMINO DELMAR

City DEMAR State CA Zip Code 92014-2208

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

Name of Employer JAMES D. JAMESON, L.L.C. Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA12.724904.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 114 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MAURICIO JARAMILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 650 OCEAN DRIVE APT. 5A
 City KEY BISCAWAYNE State FL Zip Code 33149-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TERRA FLOWERS LLC/DBA SOLE FARMS Occupation PRESIDENT/C.E.O.
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 01 / 19 / 2015
Transaction ID : SA12.723804.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. CHRISTOPHER M. JEDREY
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 DUDLEY ROAD
 City NEWTON State MA Zip Code 02459-2831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCDERMOTT WILL & EMERY Occupation ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725820.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. HON. TIMOTHY S. JEFFRIES
 Full Name (Last, First, Middle Initial)
 Mailing Address 10214 E. SHANGRILA ROAD
 City SCOTTSDALE State AZ Zip Code 85260-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer P7 ENTERPRISES Occupation FOUNDER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1200.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725586.1.0215
 Amount of Each Receipt this Period 1200.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... 0.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 115 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. PATRICK D. JENNINGS
Full Name (Last, First, Middle Initial)

Mailing Address 400 EAST 84TH STREET, #9C

City NEW YORK	State NY	Zip Code 10028-5608
------------------	-------------	------------------------

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

Name of Employer PDJ LAND CAPITAL I LLC	Occupation REAL ESTATE INVESTOR
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA12.723935.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. DANIEL J. JICK
Full Name (Last, First, Middle Initial)

Mailing Address 15 LAWRENCE ROAD

City CHESTNUT HILL	State MA	Zip Code 02467-1201
-----------------------	-------------	------------------------

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

Name of Employer HIGHVISTA STRATEGIES	Occupation INVESTMENTS
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA12.725816.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. DARYL W. JOHNSTON
Full Name (Last, First, Middle Initial)

Mailing Address 1119 SW 20TH STREET

City BOCA RATON	State FL	Zip Code 33486-6713
--------------------	-------------	------------------------

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

Name of Employer TITAN FARMS	Occupation VICE PRESIDENT-MARKETING
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724072.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. R. M. JOHNSON

Mailing Address 1149 LEE BLVD.

City ORANGEBURG State SC Zip Code 29118-3125

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

Name of Employer COX INDUSTRIES Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015

Transaction ID : SA12.724247.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MR. HERBERT JORDAN

Mailing Address 2750 NW 79TH AVENUE
C/O QUEENS FLOWER

City DORAL State FL Zip Code 33122-1067

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

Name of Employer THE QUEEN'S FLOWERS Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015

Transaction ID : SA12.723797.1.0215

Amount of Each Receipt this Period
1800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. DR. SAMUEL J. KAHN

Mailing Address P.O. BOX 787

City SOLANA BEACH State CA Zip Code 92075-0787

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

Name of Employer KENT HOLDINGS & AFFILIATES Occupation PRESIDENT & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015

Transaction ID : SA12.725871.1.0215

Amount of Each Receipt this Period
1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 117 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. BARBAROS KARAAHMETOGLU
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 PARK AVENUE FLOOR 25
 City NEW YORK State NY Zip Code 10016-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE KARAAHMETOGLU LAW FIRM PLLC Occupation LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 23 / 2015**
Transaction ID : SA12.723951.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. KEN KASTNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12015 COYNE STREET
 City LOS ANGELES State CA Zip Code 90049-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNISOURCE SOLUTIONS INC. Occupation CHAIRMAN EMERITUS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3000.00**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA12.725719.1.0215
 Amount of Each Receipt this Period **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. LOUIS KATSOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 59 E. 54TH STREET
 City NEW YORK State NY Zip Code 10022-4211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JEKMAR ASSOCIATES Occupation ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 18 / 2015**
Transaction ID : SA12.724914.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ANTHONY P. KAZAZIS
Full Name (Last, First, Middle Initial)

Mailing Address 33 BOUTON STREET

City SOUTH SALEM State NY Zip Code 10590-1300

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

Name of Employer NYC NETWORK GROUP Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : SA12.724916.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ELY KEENBERG
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 23188 OR 2777 E WASHINGT

City LOS ANGELES State CA Zip Code 90023-0188

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724518.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. KIM D. KELLER
Full Name (Last, First, Middle Initial)

Mailing Address 14106 CHAMPIONS HAMLET COURT

City HOUSTON State TX Zip Code 77069-1846

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA12.725568.1.0215

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 119 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. EARL G. KENDRICK JR.
Full Name (Last, First, Middle Initial)

Mailing Address 3964 E. PARADISE VIEW DRIVE

City PARADISE VALLEY	State AZ	Zip Code 85253-3800
-------------------------	-------------	------------------------

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

Name of Employer ARIZONA DIAMONDBACKS	Occupation MANAGING OWNERS
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2015

Transaction ID : SA12.724254.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. RANDY PARRIS KENDRICK
Full Name (Last, First, Middle Initial)

Mailing Address 3964 E. PARADISE VIEW DRIVE

City PARADISE VALLEY	State AZ	Zip Code 85253-3800
-------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2015

Transaction ID : SA12.724255.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. CODY KHAN
Full Name (Last, First, Middle Initial)

Mailing Address 243 EAGLE DRIVE

City PANAMA CITY BEACH	State FL	Zip Code 32407-2821
---------------------------	-------------	------------------------

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

Name of Employer HILTON INN RESORT	Occupation OWNER
---------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	09	/	2015

Transaction ID : SA12.723508.1.0215

Amount of Each Receipt this Period
1800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. BETH S. KLARMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 171733

City BOSTON	State MA	Zip Code 02117-3506
----------------	-------------	------------------------

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

Name of Employer THE BAUPOST GROUP LLC	Occupation PRESIDENT
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA12.725974.1.0215

Amount of Each Receipt this Period
 1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. SETH A. KLARMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 171733

City BOSTON	State MA	Zip Code 02117-3506
----------------	-------------	------------------------

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

Name of Employer THE BLAUPOST GROUP LLC	Occupation PRESIDENT
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA12.725570.1.0215

Amount of Each Receipt this Period
 3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JESSIE KNIGHT JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 SAN ANTONIO AVENUE, UNIT F.

City SAN DIEGO	State CA	Zip Code 92106-3534
-------------------	-------------	------------------------

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

Name of Employer S.D.G. & E.	Occupation CHAIRMAN & V.P. OF EXTERNAL AFFAIRS
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724041.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 121 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT L. KONRAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 SUMMER STREET
 City NORTH ANDOVER State MA Zip Code 01845-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725706.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. HON. LISA FISCH KORBATOV
 Full Name (Last, First, Middle Initial)
 Mailing Address 624 N. RODEO DRIVE
 City BEVERLY HILLS State CA Zip Code 90210-3208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ARES MANAGEMENT Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724511.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. BURNELL KRAFT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7139 E. BELMONT AVENUE
 City PARADISE VALLEY State AZ Zip Code 85253-3181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725575.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. MEREDITH S. KRUPP
 Full Name (Last, First, Middle Initial)
 Mailing Address 395 TWIN LANE S.
 City WANTAGH State NY Zip Code 11793-1942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **02 / 18 / 2015**
Transaction ID : SA12.724915.1.0215
 Amount of Each Receipt this Period: **240.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. DORIS BIGIO LANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 21141 NE 21ST PLACE
 City MIAMI State FL Zip Code 33179-1621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOUSE OF TRAVEL** Occupation: **TRAVEL CONSULTANT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt: **01 / 19 / 2015**
Transaction ID : SA12.723793.1.0215
 Amount of Each Receipt this Period: **750.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JERRY M. LANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 21141 NE 21ST PLACE
 City MIAMI State FL Zip Code 33179-1621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOUSE OF TRAVEL** Occupation: **TRAVEL CONSULTANT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt: **01 / 19 / 2015**
Transaction ID : SA12.723799.1.0215
 Amount of Each Receipt this Period: **750.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD F. LANGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 18970
 City FOUNTAIN HILLS State AZ Zip Code 85269-8970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONCEPT DEVELOPMENT CORPORATION Occupation PRESIDENT/C.E.O.
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 900.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725874.1.0215
 Amount of Each Receipt this Period 900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. JIMMY W. LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 THORNBLADE CIRCLE
 City THE WOODLANDS State TX Zip Code 77389-4684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725867.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. RUSSELL F. LESSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 HERONDO STREET
 City REDONDO BEACH State CA Zip Code 90277-2000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BODY GLOVE Occupation BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724531.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ANDREW S. LEVINE
Full Name (Last, First, Middle Initial)

Mailing Address 9 THURSTON ROAD

City MELROSE State MA Zip Code 02176-1306

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

Name of Employer DONOGHUE, BARRETT & SINGAL Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : SA12.725838.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ANDREW S. LEVINE
Full Name (Last, First, Middle Initial)

Mailing Address 9 THURSTON ROAD

City MELROSE State MA Zip Code 02176-1306

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

Name of Employer DONOGHUE, BARRETT & SINGAL Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : SA12.725839.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. DANIEL E. LEVY
Full Name (Last, First, Middle Initial)

Mailing Address 19532 EMBASSY COVER

City NORTH MIAMI BEACH State FL Zip Code 33173-

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

Name of Employer KHRONOS LLC Occupation MANAGING PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2015

Transaction ID : SA12.723530.1.0215

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. EHUD LEVY
Full Name (Last, First, Middle Initial)
Mailing Address 110 LARNE COURT

City ROSWELL	State GA	Zip Code 30076-4446
-----------------	-------------	------------------------

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

Name of Employer SELECTO SCIENTIFIC INC.	Occupation CEO & PRESIDENT
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2015

Transaction ID : SA12.723541.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. RAYMOND LIDDY
Full Name (Last, First, Middle Initial)
Mailing Address 1120 PINE STREET

City CORONADO	State CA	Zip Code 92118-2722
------------------	-------------	------------------------

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

Name of Employer CALIFORNIA DOJ	Occupation ATTORNEY
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA12.724911.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. WAYNE LINDHOLM
Full Name (Last, First, Middle Initial)
Mailing Address 25 VISTA MONTEMAR

City LAGUNA NIGUEL	State CA	Zip Code 92677-7954
-----------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724573.1.0215

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT W. LOEWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 730 BLUEBIRD CANYON DRIVE
 City LAGUNA BEACH State CA Zip Code 92651-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GIBSON, DUNN & CRUTCHER Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 01 / 20 / 2015
Transaction ID : SA12.723809.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. FERNANDO J. LOPEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2020 PONCE DELEON BLVD. STE. 905B
 City CORAL GABLES State FL Zip Code 33134-4479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TEBILLE CONSULTANTS, INC. Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724074.1.0215
 Amount of Each Receipt this Period 1800.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. LINDA LOPEZ-ALVAREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 650 SUNRISE DRIVE E.
 City VISTA State CA Zip Code 92084-6445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRIME INVESTORS Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 18 / 2015
Transaction ID : SA12.724907.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 127 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SEYMOUR LOTSOFF
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 9510

City RANCHO SANTA FE	State CA	Zip Code 92067-4510
FEC ID number of contributing federal political committee. C		
Name of Employer LOTSOFF CAPITAL MANAGEMENT	Occupation INVESTMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015
Transaction ID : SA12.724900.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JAMES K. LOWDER
Full Name (Last, First, Middle Initial)
Mailing Address 5251 HAMPSTEAD HIGH ST. UNIT 205

City MONTGOMERY	State AL	Zip Code 36116-6758
FEC ID number of contributing federal political committee. C		
Name of Employer THE COLONIAL COMPANY	Occupation CHAIRMAN OF THE BOARD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3120.00	

Date of Receipt
MM / DD / YYYY
01 / 29 / 2015
Transaction ID : SA12.724205.1.0215

Amount of Each Receipt this Period
3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. KATHY LUKIANOV
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1145

City RANCHO SANTA FE	State CA	Zip Code 92067-1145
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015
Transaction ID : SA12.724903.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 128 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BRUCE MACFARLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 82 DIMMOCK STREET
 City QUINCY State MA Zip Code 02169-1946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation VENTURE CAPITALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725844.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. GUS MACHADO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 W. 49TH STREET
 City HIALEAH State FL Zip Code 33012-3217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUS MACHADO FORD Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723928.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JOSEPH C. MAHER JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 WHITTEMORE STREET
 City WEST ROXBURY State MA Zip Code 02132-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EDWARDS ANGELL PALMER & DODGE Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725835.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. EKATERINI K. MALLIOU
Full Name (Last, First, Middle Initial)

Mailing Address 200 INDEPENDENCE AVENUE SW

City WASHINGTON State DC Zip Code 20201-0004

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

Name of Employer U.S. DEPARTMENT OF HEALTH & HUMAN SE Occupation GOVERNMENT POLICY COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723940.1.0215

Amount of Each Receipt this Period 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ANDREW MALONEY
Full Name (Last, First, Middle Initial)

Mailing Address 3020 MACOMB STREET NW

City WASHINGTON State DC Zip Code 20008-3317

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

Name of Employer HESS CORPORATION Occupation V.P. GOVERNMENT & EXTERNAL AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 02 / 03 / 2015
Transaction ID : SA12.724350.1.0215

Amount of Each Receipt this Period 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DOUGLAS MANCHESTER
Full Name (Last, First, Middle Initial)

Mailing Address 350 CAMINO DE LA REINA

City SAN DIEGO State CA Zip Code 92108-3003

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

Name of Employer UT SAN DIEGO Occupation PUBLISHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 02 / 18 / 2015
Transaction ID : SA12.724902.1.0215

Amount of Each Receipt this Period 2400.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 130 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD A. MARGOLIS
Full Name (Last, First, Middle Initial)

Mailing Address 23405 MALIBU COLONY DRIVE

City MALIBU	State CA	Zip Code 90265-4640
----------------	-------------	------------------------

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

Name of Employer COLUMBUS PACIFIC PROPERTIES	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724517.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. IVAN MARKS
Full Name (Last, First, Middle Initial)

Mailing Address 21161 POSTON LANE

City HUNTINGTN BCH	State CA	Zip Code 92646-7105
-----------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724574.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. DANIEL M. MATTOX
Full Name (Last, First, Middle Initial)

Mailing Address 2445 PINNACLE CT N

City PALM HARBOR	State FL	Zip Code 34684-1770
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : SA12.725881.1.0215

Amount of Each Receipt this Period

-201.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 131 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BRUCE J. MC DONALD
 Full Name (Last, First, Middle Initial)
 Mailing Address 16942 BEDFORD LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STATE BANK OF INDIA Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 20 / 2015**
Transaction ID : SA12.723810.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ANDREW G. MCBRIDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 K. STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN, LLP Occupation ATTORNEY AT LAW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 20 / 2015**
Transaction ID : SA12.725315.1.0215
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. SHAUN MCCUTCHEON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 56
 City MCCALLA State AL Zip Code 35111-0056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COALMONT ELECTRICAL DEVELOPMENT Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt **01 / 29 / 2015**
Transaction ID : SA12.724203.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOSHUA R. MCKOON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2565

City COLUMBUS	State GA	Zip Code 31902-2565
FEC ID number of contributing federal political committee. C		
Name of Employer MCKOON LAW GROUP, LLC	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Date of Receipt
MM / DD / YYYY
01 / 19 / 2015
Transaction ID : SA12.723798.1.0215

Amount of Each Receipt this Period
1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. SCOTT MCMILLIN
Full Name (Last, First, Middle Initial)
Mailing Address 1045 LOMA AVENUE

City CORONADO	State CA	Zip Code 92118-2833
FEC ID number of contributing federal political committee. C		
Name of Employer THE CORKY MCMILLIN COMPANIES	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
MM / DD / YYYY
02 / 28 / 2015
Transaction ID : SA12.725864.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MARK A. MEDAWAR
Full Name (Last, First, Middle Initial)
Mailing Address 48 SOUNDVIEW DRIVE

City FORT SALONGA	State NY	Zip Code 11768-1457
FEC ID number of contributing federal political committee. C		
Name of Employer MOBILEYE INC.	Occupation DIRECTOR OF SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Date of Receipt
MM / DD / YYYY
02 / 09 / 2015
Transaction ID : SA12.724664.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 133 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ANDRE MELIKIAN
Full Name (Last, First, Middle Initial)

Mailing Address 3920 MALIBU VISTA DRIVE

City MALIBU	State CA	Zip Code 90265-5611
----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE OWNER
-----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723778.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. TAMYRA MELIKIAN
Full Name (Last, First, Middle Initial)

Mailing Address 3920 MALIBU VISTA DRIVE

City MALIBU	State CA	Zip Code 90265-5611
----------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723777.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ALEX MERUELO
Full Name (Last, First, Middle Initial)

Mailing Address 3 RIM RIDGE

City NEWPORT COAST	State CA	Zip Code 92657-1715
-----------------------	-------------	------------------------

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

Name of Employer MERUELO ENTERPRISES	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA12.725973.1.0215

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 134 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. BELINDA MERUELO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 COLLINS AVENUE
 City MIAMI BEACH State FL Zip Code 33140-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725975.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. CHARLES CLARK MIKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 6847
 City GREENVILLE State SC Zip Code 29606-6847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CAPITAL DEPLOYMENT, L.L.C. Occupation REAL ESTATE INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA12.724246.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. KELLY MIKULES
 Full Name (Last, First, Middle Initial)
 Mailing Address 7035 CORINTIA STREET
 City CARLSBAD State CA Zip Code 92009-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724040.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MARK MITTAL
Full Name (Last, First, Middle Initial)

Mailing Address 845 GAGE DR

City SAN DIEGO State CA Zip Code 92106-2937

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724038.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. CORKY MIZER
Full Name (Last, First, Middle Initial)

Mailing Address 909 RANCHEROS DRIVE

City SAN MARCOS State CA Zip Code 92069-3028

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

Name of Employer CORKEYS PEST CONTROL Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA12.724882.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. SHARMIL S. MODI
Full Name (Last, First, Middle Initial)

Mailing Address 110 SWART STREET #PH2

City BOSTON State MA Zip Code 02116-

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

Name of Employer BAUPOST GROUP Occupation INVESTMENT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2015

Transaction ID : SA12.725408.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 136 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOE W. MOELLER
Full Name (Last, First, Middle Initial)
Mailing Address 27437 N. 97TH PLACE
City SCOTTSDALE State AZ Zip Code 85262-8432
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725571.1.0215
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. RUFUS MONTGOMERY
Full Name (Last, First, Middle Initial)
Mailing Address 2626 PEACHTREE STREET NW STE. 1101
City ATLANTA State GA Zip Code 30305-5626
FEC ID number of contributing federal political committee. **C**
Name of Employer THE CASCON GROUP Occupation GOVERNMENT RELATIONS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 01 / 15 / 2015
Transaction ID : SA12.723736.1.0215
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JAMES F. MOONEY III
Full Name (Last, First, Middle Initial)
Mailing Address 166 EDMUNDS RD
City WELLESLEY HILLS State MA Zip Code 02481-1332
FEC ID number of contributing federal political committee. **C**
Name of Employer BAUPOST GROUP Occupation ASSET MANAGEMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725590.1.0215
Amount of Each Receipt this Period 1620.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 137 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. LISA M. MOONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 EDMUNDS RD
 City State Zip Code
 WELLESLEY HILLS MA 02481-1332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA12.725573.1.0215
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JUAN MORA
 Full Name (Last, First, Middle Initial)
 Mailing Address 10847 CHARTWELL CRT
 City State Zip Code
 LAS VEGAS NV 89135-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 J. S. PRODUCTS INC. PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA12.725718.1.0215
 Amount of Each Receipt this Period
 900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. SAMANDA MORALES
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 GARDINER STREET
 City State Zip Code
 LYNN MA 01905-1714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EL JORGORIO DE MASSACHUSETTS, INC. PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA12.725834.1.0215
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ISAAC R. MORGAN
Full Name (Last, First, Middle Initial)

Mailing Address 444 S. CEDROS AVENUE STE. 235

City SOLANA BEACH	State CA	Zip Code 92075-1966
----------------------	-------------	------------------------

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

Name of Employer THE MORGAN GROUP	Occupation OWNER
--------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA12.724884.1.0215

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. SCOTT R. MOSS
Full Name (Last, First, Middle Initial)

Mailing Address 2820 NE 23RD PLACE

City POMPANO BEACH	State FL	Zip Code 33062-1136
-----------------------	-------------	------------------------

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

Name of Employer MOSS	Occupation CONSTRUCTION
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA12.725721.1.0215

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. TED MOUDIS
Full Name (Last, First, Middle Initial)

Mailing Address 79 MADISON AVENUE

City NEW YORK	State NY	Zip Code 10016-7802
------------------	-------------	------------------------

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

Name of Employer MUNDIS ASSOCIATES	Occupation ARCHITECT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2015

Transaction ID : SA12.723946.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DANIEL F. MULVIHILL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 85012
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 18 / 2015**
Transaction ID : SA12.724905.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. BERNIE E. NAVARRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 SW 97TH AVENUE #201
 City MIAMI State FL Zip Code 33173-1492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BEN WORTH CAPITAL PARTNERS Occupation PRIVATE EQUITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 15 / 2015**
Transaction ID : SA12.723739.1.0215
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. CASEY NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 273 BEACONS STREET APT. 3
 City BOSTON State MA Zip Code 02116-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAUPOST GROUP Occupation FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA12.725822.1.0215
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 140 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SEAN NOBLE
Full Name (Last, First, Middle Initial)

Mailing Address 3800 E. LINDEN DRIVE #25

City PHOENIX	State AZ	Zip Code 85018-
-----------------	-------------	--------------------

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

Name of Employer NOBLE ASSOCIATES, LLC	Occupation CONSULTANT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2015

Transaction ID : SA12.725101.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HENRY L. NORDHOFF
Full Name (Last, First, Middle Initial)

Mailing Address 251 OCEANVIEW AVENUE

City DEL MAR	State CA	Zip Code 92014-3321
-----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA12.724883.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ARSENIO NUNEZ SR.
Full Name (Last, First, Middle Initial)

Mailing Address 4630 LEIR DRIVE

City LA CANADA	State CA	Zip Code 91011-1417
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724592.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN J. O'NEILL JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1749 SEATON STREET NW

City WASHINGTON State DC Zip Code 20009-2625

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

Name of Employer: CAPITOL COUNSEL Occupation: ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 02 / 10 / 2015
Transaction ID : SA12.724681.1.0215

Amount of Each Receipt this Period: 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. STEVEN D. ODOM
Full Name (Last, First, Middle Initial)

Mailing Address 425 LOST CREEK DRIVE

City COLUMBIA State SC Zip Code 29212-2464

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

Name of Employer: MANCHESTER FARMS Occupation: EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 01 / 27 / 2015
Transaction ID : SA12.724076.1.0215

Amount of Each Receipt this Period: 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. TOM OLDS
Full Name (Last, First, Middle Initial)

Mailing Address 56 GOLDEN EAGLE

City IRVINE State CA Zip Code 92603-0309

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

Name of Employer: GENERATIONS HEALTHCARE Occupation: C.E.O./FOUNDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 02 / 23 / 2015
Transaction ID : SA12.725356.1.0215

Amount of Each Receipt this Period: 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. DR. SCOTT E. OLSSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 827 KUHLMAN ROAD
 City HOUSTON State TX Zip Code 77024-3105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **02 / 28 / 2015**
Transaction ID : SA12.725876.1.0215
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. BRIAN H. PANDYA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2250 N. POWHATAN STREET
 City ARLINGTON State VA Zip Code 22205-2114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN, LLP Occupation ATTORNEY AT LAW
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 20 / 2015**
Transaction ID : SA12.725318.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. LINNET L. PARTRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5545 SUGAR HILL DRIVE
 City HOUSTON State TX Zip Code 77056-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1560.00**

Date of Receipt **02 / 03 / 2015**
Transaction ID : SA12.724354.1.0215
 Amount of Each Receipt this Period **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 143 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MR. SCOTT F. PARTRIDGE		Date of Receipt MM / DD / YYYY 02 / 03 / 2015
Mailing Address 5545 SUGAR HILL DRIVE		Transaction ID : SA12.724355.1.0215
City HOUSTON	State TX	Zip Code 77056-2031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1560.00
Name of Employer BAKER BOTTS, LLP	Occupation LAWYER	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) B. MR. ALBERTO PEISACH		Date of Receipt MM / DD / YYYY 01 / 19 / 2015
Mailing Address 18851 NE 29TH AVENUE STE. 601		Transaction ID : SA12.723794.1.0215
City AVENTURA	State FL	Zip Code 33180-2844
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer GRUPO PHOENIX	Occupation C.E.O.	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) C. MR. JAIME PEISACH		Date of Receipt MM / DD / YYYY 01 / 19 / 2015
Mailing Address 7499 NW 31ST STREET		Transaction ID : SA12.723800.1.0215
City MIAMI	State FL	Zip Code 33122-1221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer PASSION GROWERS	Occupation FOUNDER	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 144 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ORESTES J. PENA JR.
Full Name (Last, First, Middle Initial)

Mailing Address 11253 VINELAND STREET

City State Zip Code
SUN VALLEY CA 91605-

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2015
Transaction ID : SA12.724577.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. RICHARD PENNELL JR.
Full Name (Last, First, Middle Initial)

Mailing Address 216 CRESCENT AVENUE

City State Zip Code
GREENVILLE SC 29605-2815

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

Name of Employer Occupation
METROMONT CORPORATION EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2015
Transaction ID : SA12.723915.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR RON E. PHIFE
Full Name (Last, First, Middle Initial)

Mailing Address 6131 RANCHO MISSION RD
UNIT 319

City State Zip Code
SAN DIEGO CA 92108-2220

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

Name of Employer Occupation
COUNTY OF SAN DIEGO STAFF ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2015
Transaction ID : SA12.724901.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 145 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SERGIO PINO
Full Name (Last, First, Middle Initial)
Mailing Address 142 ISLA DORADA BLVD

City CORAL GABLES	State FL	Zip Code 33143-6549
----------------------	-------------	------------------------

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

Name of Employer CENTURY BUILDERS GROUP	Occupation CEO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2015

Transaction ID : SA12.723745.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. TATIANA PINO
Full Name (Last, First, Middle Initial)
Mailing Address 142 ISLA DORADA BLVD

City CORAL GABLES	State FL	Zip Code 33143-6549
----------------------	-------------	------------------------

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

Name of Employer CENTURY HOMES	Occupation HOMEMAKER
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2015

Transaction ID : SA12.723744.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. OSCAR M. PRICE
Full Name (Last, First, Middle Initial)
Mailing Address 108 POINCIANA DR

City BIRMINGHAM	State AL	Zip Code 35209-2039
--------------------	-------------	------------------------

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

Name of Employer WALLACE, JORDAN, RATLIFF & BRANDT, LL	Occupation ATTORNEY
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA12.724200.1.0215

Amount of Each Receipt this Period

450.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 146 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. STEVEN PRICE

Mailing Address 15 HEATHCOTE ROAD

City State Zip Code
SCARSDALE NY 10583-4415

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

Name of Employer Occupation
TOWNSQUARE MEDIA MEDIA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2015

Transaction ID : SA12.723874.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MR. BRADLEY V. RADOFF

Mailing Address 1177 WEST LOOP SOUTH
SUITE 1625

City State Zip Code
HOUSTON TX 77027-9036

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

Name of Employer Occupation
FONDREN MANAGEMENT LP INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3120.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SA12.724875.1.0215

Amount of Each Receipt this Period
3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. BALAJI S. RAJAN

Mailing Address 490 ETON DRIVE

City State Zip Code
NORTH BARRINGTON IL 60010-2152

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

Name of Employer Occupation
CEANNATE CORPORATION C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4960.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2015

Transaction ID : SA12.723958.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 147 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BALAJI S. RAJAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 490 ETON DRIVE
 City NORTH BARRINGTON State IL Zip Code 60010-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CEANNATE CORPORATION Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4960.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725720.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. ALVIN J. RALSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 HEDWIG CIRCLE
 City HOUSTON State TX Zip Code 77024-4521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725562.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. FRANK REDDICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2004 JOHN STREET
 City MANHATTAN BEACH State CA Zip Code 90266-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AKIN GUMP STRAUSS HAUER & FELD Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724526.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 148 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. KERRY REYNOLDS
Full Name (Last, First, Middle Initial)
Mailing Address 1510 KINGS ROAD

City NEWPORT BEACH	State CA	Zip Code 92663-5019
-----------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA12.725357.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DR. SEYED REZAIAN
Full Name (Last, First, Middle Initial)
Mailing Address 611 N. RODEO DRIVE

City BEVERLY HILLS	State CA	Zip Code 90210-3207
-----------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation SURGEON
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2015

Transaction ID : SA12.724515.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. GLENN C. RICE
Full Name (Last, First, Middle Initial)
Mailing Address 2700 AQUA VISTA BLVD.

City FORT LAUDERDALE	State FL	Zip Code 33301-1553
-------------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation SCIENTIST
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
908.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724061.1.0215

Amount of Each Receipt this Period

900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 149 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DORIS E. D. RICH
Full Name (Last, First, Middle Initial)
Mailing Address 21 FLANAGAN DRIVE
City FRAMINGHAM State MA Zip Code 01701-3712
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt: **02 / 27 / 2015**
Transaction ID : SA12.725829.1.0215
Amount of Each Receipt this Period: **600.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. WILLIAM LEON RICHEY JR.
Full Name (Last, First, Middle Initial)
Mailing Address 2 S. BISCAYNE BLVD. 34TH FLR. ONE BISCAYNE TOWER
City MIAMI State FL Zip Code 33131-1806
FEC ID number of contributing federal political committee. **C**
Name of Employer: **WILLIAM L. RICHEY, P.A.** Occupation: **LAWYER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1200.00**

Date of Receipt: **01 / 27 / 2015**
Transaction ID : SA12.724073.1.0215
Amount of Each Receipt this Period: **1200.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. H. DOUGLAS RILEY
Full Name (Last, First, Middle Initial)
Mailing Address 1400 N. SCOTTSDALE ROAD
City SCOTTSDALE State AZ Zip Code 85257-3412
FEC ID number of contributing federal political committee. **C**
Name of Employer: **RILEY RESOURCES** Occupation: **INVESTING**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **900.00**

Date of Receipt: **02 / 19 / 2015**
Transaction ID : SA12.725102.1.0215
Amount of Each Receipt this Period: **900.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. SCOTT R. RIVENES
Full Name (Last, First, Middle Initial)
Mailing Address 3911 OAKMONT COURT

City SUGAR LAND	State TX	Zip Code 77479-2458
--------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	25	/	2015

Transaction ID : SA12.725563.1.0215

Amount of Each Receipt this Period
750.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. RYAN ROBSON
Full Name (Last, First, Middle Initial)
Mailing Address 633 GRAY ROAD STE. 108

City GILBERT	State AZ	Zip Code 85296-4200
-----------------	-------------	------------------------

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

Name of Employer M.R. CAPITOL	Occupation INVESTOR
----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	24	/	2015

Transaction ID : SA12.725459.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JASON L. RODGERS
Full Name (Last, First, Middle Initial)
Mailing Address 157 GREEN FORREST LANE

City WARD	State SC	Zip Code 29166-9322
--------------	-------------	------------------------

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

Name of Employer TITAN FARMS	Occupation FARM MANAGER
---------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	27	/	2015

Transaction ID : SA12.724071.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 151 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD K. ROEDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11150 SANTA MONICA BLVD.
 SUITE 750
 City State Zip Code
 LOS ANGELES CA 90025-0528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VANCE STREET CAPITAL PARTNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA12.724042.1.0215
 Amount of Each Receipt this Period
 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. BENNETT LAWRENCE ROSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7719 TOMLINSON AVENUE
 City State Zip Code
 CABIN JOHN MD 20818-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILEY REIN LLP ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : SA12.725310.1.0215
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. HOWARD S. ROWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 TOYOPA DRIVE
 City State Zip Code
 PACIFIC PALISADES CA 90272-4470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MERRILL LYNCH FINANCIAL ADVISOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015
Transaction ID : SA12.724513.1.0215
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 152 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JAMES A. RUBRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3435 WOODHAVEN ROAD NW

City ATLANTA State GA Zip Code 30305-1008

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

Name of Employer PRIVET FUND MANAGEMENT L.L.C. Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4900.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725591.1.0215

Amount of Each Receipt this Period 4900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. MARY A. RUBRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3435 WOODHAVEN ROAD NW

City ATLANTA State GA Zip Code 30305-1008

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4620.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725587.1.0215

Amount of Each Receipt this Period 4620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. CLIVE RUNNELLS
Full Name (Last, First, Middle Initial)

Mailing Address 3649 CHEVY CHASE DRIVE

City HOUSTON State TX Zip Code 77019-3009

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 06 / 2015
Transaction ID : SA12.723480.1.0215

Amount of Each Receipt this Period 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 153 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DOMINGO SANCHEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2800 VICKIE COURT
 City KISSIMMEE State FL Zip Code 34744-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TITAN MANAGEMENT Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723918.1.0215
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. LAWRENCE SARF
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 E. SHORE ROAD STE. 302
 City GREAT NECK State NY Zip Code 11023-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION CLEARING HOUSE Occupation SUPERMARKET CREDIT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723931.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ALBERTO SASSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7499 NW 31ST STREET
 City MIAMI State FL Zip Code 33122-1221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFINITE ROSE LLC Occupation SALES, VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 01 / 19 / 2015
Transaction ID : SA12.723779.1.0215
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 154 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. HENRY SCANLON
 Full Name (Last, First, Middle Initial)
 Mailing Address 837 PONTE VEDRA BLVD.
 City State Zip Code
 PONTE VEDRA BEACH FL 32082-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : SA12.723738.1.0215
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. OZZIE A. SCHINDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1451 STILLWATER DRIVE
 City State Zip Code
 MIAMI FL 33141-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GREENBERG TRAUIG ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : SA12.723715.1.0215
 Amount of Each Receipt this Period
 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MICHAEL SCHOOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1012 MCCOY DRIVE
 City State Zip Code
 IRVING TX 75062-8005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ESSENTIAL FORMULAS INC. EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA12.725971.1.0215
 Amount of Each Receipt this Period
 3060.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 155 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. CHRISTINE HEARST SCHWARZMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 PARK AVE
 15TH FLOOR
 City NEW YORK State NY Zip Code 10021-4288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1560.00**

Date of Receipt: **01 / 15 / 2015**
Transaction ID : SA12.723735.1.0215
 Amount of Each Receipt this Period: **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. STEVE A. SCHWARZMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 PARK AVENUE
 THE BLACKSTONE GROUP
 City NEW YORK State NY Zip Code 10154-0004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **THE BLACKSTONE GROUP** Occupation: **CHAIRMAN, CEO, CO-FOUNDER**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1560.00**

Date of Receipt: **01 / 15 / 2015**
Transaction ID : SA12.723734.1.0215
 Amount of Each Receipt this Period: **1560.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. VIRGINIA SCHWERIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 667 OCEAN ROAD
 City VERO BEACH State FL Zip Code 32963-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1500.00**

Date of Receipt: **02 / 28 / 2015**
Transaction ID : SA12.725866.1.0215
 Amount of Each Receipt this Period: **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 156 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. WARREN L. SCHWERIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 667 OCEAN ROAD
 City VERO BEACH State FL Zip Code 32963-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725869.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. HENRY C. SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 535
 City ALLENDALE State SC Zip Code 29810-0535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COLLUM'S LUMBER PRODUCTS, LLC Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724078.1.0215
 Amount of Each Receipt this Period 3600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. GEORGE E. SEAY III
 Full Name (Last, First, Middle Initial)
 Mailing Address 325 N. SAINT PAUL STREET SUITE 3500
 City DALLAS State TX Zip Code 75201-3869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ANNANDALE CAPITAL Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 12 / 2015
Transaction ID : SA12.723569.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 157 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RAY MICHAEL SENKOWSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9559 BELL DR
 City State Zip Code
 GREAT FALLS VA 22066-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILEY REIN LLP ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2015
Transaction ID : SA12.725461.1.0215
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. GAIL L. SHAPIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 SACKETT STREET
 City State Zip Code
 HICKSVILLE NY 11801-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015
Transaction ID : SA12.723952.1.0215
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT SHAPIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 14225 VENTURA BLVD. STE. 100
 City State Zip Code
 SHERMAN OAKS CA 91423-2758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WOODBRIDGE STRUCTURED FUNDING PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA12.724349.1.0215
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT SHAPIRO
Full Name (Last, First, Middle Initial)
Mailing Address 14225 VENTURA BLVD. STE. 100

City SHERMAN OAKS	State CA	Zip Code 91423-2758
FEC ID number of contributing federal political committee. C		
Name of Employer WOODBIDGE STRUCTURED FUNDING	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

Date of Receipt
01 / 31 / 2015
Transaction ID : SA12.724529.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DR. ROBERT SHEPPARD
Full Name (Last, First, Middle Initial)
Mailing Address 12319 DRAKE PRAIRIE LANE

City CYPRESS	State TX	Zip Code 77429-3889
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Date of Receipt
02 / 25 / 2015
Transaction ID : SA12.725564.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. SANJAY KADANDALE SHETTY
Full Name (Last, First, Middle Initial)
Mailing Address 73 STONECREST DR

City NEEDHAM	State MA	Zip Code 02492-2785
FEC ID number of contributing federal political committee. C		
Name of Employer STEWARD HEALTH CARE SYSTEM	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt
02 / 27 / 2015
Transaction ID : SA12.725828.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 159 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MATTHEW KEITH SIDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 COMMONWEATH AVENUE
 UNIT 6
 City BOSTON State MA Zip Code 02115-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THREE BAYS CAPITAL, L.P. Occupation CHIEF INVESTMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725815.1.0215
 Amount of Each Receipt this Period 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. PATRICIA E. SIMMONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3957 PARADISE VIEW DRIVE
 City PARADISE VALLEY State AZ Zip Code 85253-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA12.725619.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ANTHONY A. SIMONELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 FUSKIE LANE
 City DAUFUSKIE ISLAND State SC Zip Code 29915-9111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725576.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 160 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. NICHOLAS SINATRA
Full Name (Last, First, Middle Initial)
Mailing Address 1526 MAIN STREET #5

City BUFFALO	State NY	Zip Code 14209-1722
-----------------	-------------	------------------------

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

Name of Employer SINATRA & COMPANY REAL ESTATE	Occupation REAL ESTATE INVESTOR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2015

Transaction ID : SA12.723572.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. TED SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 279 CRESCENT BAY DRIVE

City LAGUNA BEACH	State CA	Zip Code 92651-1322
----------------------	-------------	------------------------

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

Name of Employer MIND RESEARCH INSTITUTE	Occupation CHAIRMAN
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA12.723558.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. TERESA P. SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 120 FOX COVE COURT

City ALPHARETTA	State GA	Zip Code 30022-7199
--------------------	-------------	------------------------

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

Name of Employer BHHS REALTY PROPERTIES	Occupation REAL ESTATE
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723803.1.0215

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 161 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. THOMAS S. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5619 BORDLEY DRIVE
 City HOUSTON State TX Zip Code 77056-2329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer K.S.A. INDUSTRIES, INC. Occupation INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 02 / 03 / 2015
Transaction ID : SA12.724356.1.0215
 Amount of Each Receipt this Period 2600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. RICHARD SOLOWAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 BAYVIEW AVENUE
 City AMITYVILLE State NY Zip Code 11701-2801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAPCO SECURING Occupation SECURITY BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723923.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MICHAEL M. SPERLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 MILFORD STREET APT. 2
 City BOSTON State MA Zip Code 02118-3649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAUPOST Occupation ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725821.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 162 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. STEPHEN C. SPINKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 WOODLAND WAY
 City GREENVILLE State SC Zip Code 29607-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPINX Occupation MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1500.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723956.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. STEWART SPINKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 RIVER PLACE #302
 City GREENVILLE State SC Zip Code 29601-2583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPINX Occupation EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1500.00

Date of Receipt 02 / 18 / 2015
Transaction ID : SA12.724912.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT E. SPRING
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE GRACIE SQUARE
 City NEW YORK State NY Zip Code 10028-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1560.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723926.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT I. STROUGO
 Full Name (Last, First, Middle Initial)
 Mailing Address 286 MADDISON AVENUE STE. 2200
 City NEW YORK State NY Zip Code 10017-6345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 01 / 23 / 2015
Transaction ID : SA12.723950.1.0215
 Amount of Each Receipt this Period 750.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. VIVA STROYKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 3RD STREET
 City MANHATTAN BEACH State CA Zip Code 90266-6413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724520.1.0215
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. DR. SWAID N. SWAID
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 660827
 City BIRMINGHAM State AL Zip Code 35266-0827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NEWOLOGICAL SURGERY ASSOCIATES Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA12.724204.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 164 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JAMES M. SWEENEY
Full Name (Last, First, Middle Initial)

Mailing Address 1841 LERNER LANE

City SANTA ANA State CA Zip Code 92705-3184

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

Name of Employer TANGRAMCARE Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : SA12.724878.1.0215

Amount of Each Receipt this Period
 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. RICHARD SYBERT
Full Name (Last, First, Middle Initial)

Mailing Address 701 FIFTH AVE

City SEATTLE State WA Zip Code 98104-7097

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

Name of Employer GORDON & REES LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2015
Transaction ID : SA12.725407.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. HARRY TCHIRA
Full Name (Last, First, Middle Initial)

Mailing Address 644 W. 51ST TERRACE

City MIAMI BEACH State FL Zip Code 33140-2617

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

Name of Employer DARNEL, INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2015
Transaction ID : SA12.723766.1.0215

Amount of Each Receipt this Period
 750.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 165 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOSE FRANCISCO TERAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 445 GRAND BAY DRIVE
 APARTMENT 702
 City KEY BISCAWAYNE State FL Zip Code 33149-1907
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 01 / 15 / 2015
Transaction ID : SA12.723742.1.0215
 Amount of Each Receipt this Period 1530.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. MARIA LOURDES TERAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 445 GRAND BAY DR
 City KEY BISCAWAYNE State FL Zip Code 33149-1905
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 01 / 15 / 2015
Transaction ID : SA12.723743.1.0215
 Amount of Each Receipt this Period 1530.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. WILLIAM S. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 NEWPORT CENTER DR. STE. 1220
 City NEWPORT BEACH State CA Zip Code 92660-6447
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA12.725355.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 166 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DIANE R. TOOKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 15802 N. 71ST STREET #657

City SCOTTSDALE	State AZ	Zip Code 85254-7115
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA12.724686.1.0215

Amount of Each Receipt this Period

300.00

 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. GARY L. TOOKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 15802 N. 71ST STREET #657

City SCOTTSDALE	State AZ	Zip Code 85254-7115
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA12.724687.1.0215

Amount of Each Receipt this Period

300.00

 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MARK P. TORTORELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 WORCESTER STREET APT. 1

City BOSTON	State MA	Zip Code 02118-3902
FEC ID number of contributing federal political committee. C		
Name of Employer SIGMA VENTURE ASSOCIATE	Occupation SENIOR ASSOCIATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA12.725830.1.0215

Amount of Each Receipt this Period

600.00

 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 167 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN C. TSUNIS
Full Name (Last, First, Middle Initial)

Mailing Address 2929 EXPRESSWAY DRIVE N.

City ISLANDIA State NY Zip Code 11749-5306

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

Name of Employer TSUNIS REALTY Occupation HOTEL OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA12.723954.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROY VAGELOS
Full Name (Last, First, Middle Initial)

Mailing Address 82 MOSTE ROAD

City FAR HILLS State NJ Zip Code 07931-2228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA12.724913.1.0215

Amount of Each Receipt this Period
 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JOSEPH PEP VALDES
Full Name (Last, First, Middle Initial)

Mailing Address 1270 S. MOLINO AVENUE

City PASADENA State CA Zip Code 91106-

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

Name of Employer PARKING COMPNAY OF AMERICA Occupation PARKING EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2015

Transaction ID : SA12.724580.1.0215

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 168 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. BELINDA VANDERSLOOT
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 50305
 City IDAHO FALLS State ID Zip Code 83405-0305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 5000.00

Date of Receipt: 01 / 15 / 2015
Transaction ID : SA12.723741.1.0215
 Amount of Each Receipt this Period: 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. FRANK VANDERSLOOT
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 50277
 City IDAHO FALLS State ID Zip Code 83405-0277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: MELALEUCA INC. Occupation: EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 5000.00

Date of Receipt: 01 / 15 / 2015
Transaction ID : SA12.723740.1.0215
 Amount of Each Receipt this Period: 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. NANCY JANE VICTORY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9559 BELL DRIVE
 City GREAT FALLS State VA Zip Code 22066-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: WILEY REIN L.L.P. Occupation: PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 3200.00

Date of Receipt: 02 / 24 / 2015
Transaction ID : SA12.725460.1.0215
 Amount of Each Receipt this Period: 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 169 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. M. ALLAN VIGIL
Full Name (Last, First, Middle Initial)
Mailing Address 623 CHAMPIONS DRIVE

City MCDONOUGH	State GA	Zip Code 30253-4284
-------------------	-------------	------------------------

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

Name of Employer ALLAN VIGIL FORD LINCOLN	Occupation PRESIDENT/CEO
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723805.1.0215

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DR. SRINIVAS VODNALA
Full Name (Last, First, Middle Initial)
Mailing Address 11811 SUNSET LAKE COURT

City HOUSTON	State TX	Zip Code 77065-3928
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA12.725877.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. BRADLEY S. WAGGONER
Full Name (Last, First, Middle Initial)
Mailing Address 17210 SADDLE RIDGE PASS

City CYPRESS	State TX	Zip Code 77433-5961
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA12.725557.1.0215

Amount of Each Receipt this Period

1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 170 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN B. WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 7 PINE GROVE CIRCLE

City HOUSTON State TX Zip Code 77024-3022

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

Name of Employer ENERVEST, LTD. Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA12.725313.1.0215

Amount of Each Receipt this Period 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOSEPH C. WALL
Full Name (Last, First, Middle Initial)

Mailing Address 1011 FIRST ST SE

City D.C. State DC Zip Code 20003-3392

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

Name of Employer GOLDMAN SACHS Occupation VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4620.00

Date of Receipt 02 / 03 / 2015
Transaction ID : SA12.724352.1.0215

Amount of Each Receipt this Period 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. KATHALEEN WALL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 667

City HOUSTON State TX Zip Code 77001-0667

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725842.1.0215

Amount of Each Receipt this Period 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 171 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD W. WEEKLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 N. POST OAK ROAD
 City HOUSTON State TX Zip Code 77055-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725814.1.0215
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DAVID R. WEHRLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 MANHATTAN BEACH BLVD. #100
 City REDONDO BEACH State CA Zip Code 90278-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEDGEWOOD Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA12.725414.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. LISA M. WEHRLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 MANHATTAN BEACH BLVD. #100
 City REDONDO BEACH State CA Zip Code 90278-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA12.725413.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 172 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ERIC WEIDER
Full Name (Last, First, Middle Initial)
Mailing Address 20750 W. VENTURA BLVD. #310

City WOODLAND HILLS	State CA	Zip Code 91364-6236
FEC ID number of contributing federal political committee. C		
Name of Employer WEIDER HEALTH & FITNESS	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
01 / 31 / 2015
Transaction ID : SA12.724588.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT S. WEINER
Full Name (Last, First, Middle Initial)
Mailing Address 2 LEIGHTON CT

City ATLANTA	State GA	Zip Code 30327-4308
FEC ID number of contributing federal political committee. C		
Name of Employer TOTALLY ENTERPRISES	Occupation C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
01 / 23 / 2015
Transaction ID : SA12.723919.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MAX JAIME WEISINGER
Full Name (Last, First, Middle Initial)
Mailing Address 7262 HEAVEN LANE

City FORT MYERS	State FL	Zip Code 33908-4201
FEC ID number of contributing federal political committee. C		
Name of Employer LIPMAN	Occupation DIRECTOR OF COMMUNITY & GOV'T. RELA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
02 / 20 / 2015
Transaction ID : SA12.725307.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 173 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. IRA E. WEISS

Mailing Address 310 HUDSON STREET

City State Zip Code
HACKENSACK NJ 07601-6766

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

Name of Employer Occupation
ACME REGISTER CASH REGISTER BUSINESS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA12.723924.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MR. GREGORY WENDT

Mailing Address 1 MARKET STREET SUITE 2000
STEUART TOWER

City State Zip Code
SAN FRANCISCO CA 94105-1411

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

Name of Employer Occupation
CAPITAL RESEARCH FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2015

Transaction ID : SA12.725565.1.0215

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. EDWARD H. WENGER

Mailing Address 450 SE FIFTH AVENUE

City State Zip Code
BOCA RATON FL 33432-5519

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724052.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 174 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BRADFORD D. WEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 174 W. CUMSTOCK AVENUE
 City WINTER PARK State FL Zip Code 32789-4309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA12.725868.1.0215
 Amount of Each Receipt this Period 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MARK C. WEST
 Full Name (Last, First, Middle Initial)
 Mailing Address 3587 TUXEDO PARK
 City ATLANTA State GA Zip Code 30305-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FIRST BEACON INVESTMENTS, INC. Occupation REAL ESTATE DEV./INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 12 / 2015
Transaction ID : SA12.723571.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. THOMAS D. WESTFALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 S. FLOWER STREET
 City LOS ANGELES State CA Zip Code 90071-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WFC Occupation SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 01 / 31 / 2015
Transaction ID : SA12.724519.1.0215
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 175 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN H. WESTON III
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 BECKY GIBSON ROAD
 City GREER State SC Zip Code 29651-5238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE CAPITAL CORPORATION Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2760.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724064.1.0215
 Amount of Each Receipt this Period 2760.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JIMMY S. WHITED
 Full Name (Last, First, Middle Initial)
 Mailing Address 7232 FISHER ISLAND DRIVE
 City MIAMI BEACH State FL Zip Code 33109-0737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMERICAN SOUTHWEST INSURANCE MANAGERS Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 12 / 2015
Transaction ID : SA12.723570.1.0215
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. DR. JEROME S. WILKENFELD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 690685
 City HOUSTON State TX Zip Code 77269-0685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA12.725556.1.0215
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 176 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DEANNA H. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 COLUMBIA ROAD
 City EDGEFIELD State SC Zip Code 29824-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOG CREEK TIMBER CO., INC. Occupation CONTROLLER/CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 27 / 2015**
Transaction ID : SA12.724081.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. STEPHEN B. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6015 VISTA DE LA MESA
 City LA JOLLA State CA Zip Code 92037-6545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SENTURE PARTNERS INC. Occupation PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **01 / 27 / 2015**
Transaction ID : SA12.724039.1.0215
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. THEO R. WILLIAMS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 COLUMBIA ROAD
 City EDGEFIELD State SC Zip Code 29824-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 27 / 2015**
Transaction ID : SA12.724069.1.0215
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 177 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. MARK WYLAND

Mailing Address P.O. BOX 1008

City SOLANA BEACH State CA Zip Code 92075-1008

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **01 / 27 / 2015**

Transaction ID : SA12.724033.1.0215

Amount of Each Receipt this Period **600.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. DR. RAMA RAO YERRAMSETTI

Mailing Address 2403 LEATON PARK COURT

City HOUSTON State TX Zip Code 77077-2122

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **02 / 25 / 2015**

Transaction ID : SA12.725577.1.0215

Amount of Each Receipt this Period **1500.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. DR. NOE ZAMORA

Mailing Address 930 LAMONTE LANE

City HOUSTON State TX Zip Code 77018-4440

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **02 / 25 / 2015**

Transaction ID : SA12.725567.1.0215

Amount of Each Receipt this Period **1500.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 178 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. ADVANCE AMERICA CASH ADVANCE CENTERS INC PAC		Date of Receipt MM / DD / YYYY 01 / 27 / 2015 Transaction ID : SA12.724048.1.0215
Mailing Address 135 N. CHURCH STREET		Amount of Each Receipt this Period 600.00
City SPARTANBURG	State SC	Zip Code 29306-5138
FEC ID number of contributing federal political committee. C C00429001	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		TRANSFER [MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) B. AMERICAN PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : SA12.725301.1.0215
Mailing Address 499 S. CAPITOL ST SW SUITE 409		Amount of Each Receipt this Period 600.00
City WASHINGTON	State DC	Zip Code 20003-4023
FEC ID number of contributing federal political committee. C C00041061	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		TRANSFER [MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) C. BGR GOVERNMENT AFFAIRS, LLC		Date of Receipt MM / DD / YYYY 01 / 27 / 2015 Transaction ID : SA12.724051.1.0215
Mailing Address P.O. BOX 14416		Amount of Each Receipt this Period 900.00
City WASHINGTON	State DC	Zip Code 20044-4416
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1710.00	
		TRANSFER [MEMO ITEM] TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 179 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. BRADLEY ARANT BOULT CUMMINGSS FEDERAL PAC

Mailing Address 1819 5TH AVENUE NORTH
ONE FEDERAL PLACE

City BIRMINGHAM State AL Zip Code 35203-2120

FEC ID number of contributing federal political committee. **C** C00500017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
01 / 23 / 2015
Transaction ID : SA12.723965.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. BURSON-MARSTELLER/YOUNG & RUBICAM POLITICAL ACTION COMMITTEE

Mailing Address 1110 VERMONT AVENUE NW, STE. 1000

City WASHINGTON State DC Zip Code 20005-3551

FEC ID number of contributing federal political committee. **C** C00201863

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
02 / 03 / 2015
Transaction ID : SA12.724345.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. CBS CORPORATION PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 540

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00423442

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
02 / 20 / 2015
Transaction ID : SA12.725302.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 180 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. CENCAL HOLDING LLC

Mailing Address 1855 SATELLITE BLVD. STE. 100

City DULUTH	State GA	Zip Code 30097-5227
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA12.723786.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. COOPERATIVE OF AMERICAN PHYSICIANS FEDERAL PAC

Mailing Address 333 S. HOPE STREET 8TH FLOOR

City LOS ANGELES	State CA	Zip Code 90071-3001
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FEC ID number of contributing federal political committee. **C C00161604**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	09	/	2015

Transaction ID : SA12.724665.1.0215

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. EDWARDS WILDMAN PAC INC.

Mailing Address 2800 FINANCIAL PLAZA

City PROVIDENCE	State RI	Zip Code 02903-2407
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FEC ID number of contributing federal political committee. **C C00468009**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA12.725713.1.0215

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 181 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. FOX PAC

Mailing Address 400 N. CAPITOL STREET NW SUITE 890

City WASHINGTON State DC Zip Code 20001-1555

FEC ID number of contributing federal political committee. **C** C00171421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 20 / 2015
Transaction ID : SA12.725303.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. GENERAL ATOMICS PAC

Mailing Address P.O. BOX 22930

City SAN DIEGO State CA Zip Code 92192-2930

FEC ID number of contributing federal political committee. **C** C00215285

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
02 / 18 / 2015
Transaction ID : SA12.724895.1.0215

Amount of Each Receipt this Period
1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. GOTHAM GOVERNMENT RELATIONS LLC

Mailing Address 1399 FRANKLIN AVE STE 200

City GARDEN CITY State NY Zip Code 11530-1679

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 18 / 2015
Transaction ID : SA12.724896.1.0215

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 182 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. GOVERNMENT IS NOT GOD PAC

Mailing Address P.O. BOX 77237

City WASHINGTON State DC Zip Code 20013-8237

FEC ID number of contributing federal political committee. **C** C00297531

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA12.725300.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. INTEL SAT CORPORATION PAC

Mailing Address 3400 INTERNATIONAL DRIVE NW

City WASHINGTON State DC Zip Code 20008-3006

FEC ID number of contributing federal political committee. **C** C00412403

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA12.725305.1.0215

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. KELLEY DRYE & WARREN LLP, PAC

Mailing Address 3050 K. STREET NW, STE. 400

City WASHINGTON State DC Zip Code 20007-5100

FEC ID number of contributing federal political committee. **C** C00301929

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015

Transaction ID : SA12.724346.1.0215

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 183 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. LOCKE, LORD, BISSELL & LIDDELL PAC

Mailing Address 600 TRAVIS STREET
STE. 2800

City HOUSTON State TX Zip Code 77002-2914

FEC ID number of contributing federal political committee. **C** C00117861

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2015

Transaction ID : SA12.725714.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MAYNARD COOPER & GALE, PC PAC

Mailing Address 2400 REGIONS HARBERT PLAZA
1901 6TH AVENUE N.

City BIRMINGHAM State AL Zip Code 35203-2618

FEC ID number of contributing federal political committee. **C** C00272724

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2015

Transaction ID : SA12.724207.1.0215

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MCKENNA LONG & ALDRIDGE LLP

Mailing Address 303 PEACHTREE STREET STE. 5300

City ATLANTA State GA Zip Code 30308-3265

FEC ID number of contributing federal political committee. **C** C00391383

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
01 / 19 / 2015

Transaction ID : SA12.723788.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 184 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. NELSON MULLINS RILEY & SCARBOROUGH FEDERAL PAC

Mailing Address P.O. BOX 11070

City COLUMBIA State SC Zip Code 29211-1070

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA12.724049.1.0215

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. PROTECTIVE LIFE CORPORATION FEDERAL PAC

Mailing Address P.O. BOX 2606

City BIRMINGHAM State AL Zip Code 35202-2606

FEC ID number of contributing federal political committee. **C** C00161414

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015

Transaction ID : SA12.724208.1.0215

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. REGIONS FINANCIAL CORPORATION PAC

Mailing Address 1015 15TH STREET NW
SUITE 920

City WASHINGTON State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C** C00432252

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3120.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015

Transaction ID : SA12.724206.1.0215

Amount of Each Receipt this Period
3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 185 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. ROCK-TENN PAC

Mailing Address 504 THRASHER STREET

City NORCROSS State GA Zip Code 30071-1967

FEC ID number of contributing federal political committee. **C** C00117424

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015

Transaction ID : SA12.723787.1.0215

Amount of Each Receipt this Period
 900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. ROTHMAN INSTITUTE PAC

Mailing Address 925 CHESTNUT STREET FLR. 5
C/O DR. GERALD WILLIAMS

City PHILADELPHIA State PA Zip Code 19107-4206

FEC ID number of contributing federal political committee. **C** C00558700

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724047.1.0215

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. SOCIETY OF THE PLASTICS IND, INC. PAC

Mailing Address 1667 K. STREET NW STE. 1000

City WASHINGTON State DC Zip Code 20006-1620

FEC ID number of contributing federal political committee. **C** C00309716

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA12.724050.1.0215

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 186 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. THE GEO GROUP, INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 621 NW 53RD STREET
 ONE PARK PLACE, SUITE 700
 City BOCA RATON State FL Zip Code 33487-8235
 FEC ID number of contributing federal political committee. **C** C00382150
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015
Transaction ID : SA12.723964.1.0215
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. TRALAPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 N. WASHINGTON STREET
 SUITE 410
 City ALEXANDRIA State VA Zip Code 22314-1939
 FEC ID number of contributing federal political committee. **C** C00499400
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : SA12.725304.1.0215
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. VULCAN MATERIALS COMPANY PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 385014
 City BIRMINGHAM State AL Zip Code 35238-5014
 FEC ID number of contributing federal political committee. **C** C00116020
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA12.724209.1.0215
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 187 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. RUBIO VICTORY COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S WASHINGTON ST
 STE 115
 City ALEXANDRIA State VA Zip Code 22314-5404
 FEC ID number of contributing federal political committee. **C** C00494617
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 879276.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : 031520150331
 Amount of Each Receipt this Period
 240047.89
 TRANSFER
 TRANSFER NET JF PROCEEDS

B. MRS. ANNA ABERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 VIA DOLCE UNIT 306
 City MARINA DEL REY State CA Zip Code 90292-6775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED INCOME PROPERTY OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726712.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. ASIF AHSAN
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE LIBERTY PLAZA
 City NEW YORK State NY Zip Code 10006-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROYAL BANK OF CANADA INVESTMENT BANKING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA12.727095.1.0315
 Amount of Each Receipt this Period
 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	240047.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 188 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DOROTHY ALBAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 W. INDIES DRIVE
 City PALM BEACH State FL Zip Code 33480-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : SA12.727358.1.0315
 Amount of Each Receipt this Period: **450.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JAMES C. ALBAN III
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 W. INDIES DRIVE
 City PALM BEACH State FL Zip Code 33480-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **RETIRED** Occupation: **RETIRED**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : SA12.727344.1.0315
 Amount of Each Receipt this Period: **450.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ANDREW W. ALBSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 E. 75TH STREET APT. 2A
 City NEW YORK State NY Zip Code 10021-2762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **GOLDBERG, WEPRIN, FINKEL, GOLDSTEIN I** Occupation: **ATTORNEY**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3000.00**

Date of Receipt: **03 / 18 / 2015**
Transaction ID : SA12.726713.1.0315
 Amount of Each Receipt this Period: **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 189 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. SHELLEY ANN ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 HUNTINGTON CIRCLE
 City PASADENA State CA Zip Code 91106-4510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EVEREST PROPERTIES II LLC Occupation PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727298.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. SHELLEY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 199 S. LOS ROBIES AVENUE
 City PASADENA State CA Zip Code 91101-2452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727301.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. THOMAS L. ALTMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 NE 2ND STREET
 City BELLE GLADE State FL Zip Code 33430-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MORGAN STANLEY Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA12.726153.1.0315
 Amount of Each Receipt this Period 396.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 190 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1375 W. HILLSBORO BLVD.

City DEERFIELD BEACH State FL Zip Code 33442-1719

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

Name of Employer: STOR-ALL DEVELOPMENT Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 03 / 13 / 2015
Transaction ID : SA12.726490.1.0315

Amount of Each Receipt this Period: 1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. CHRISTIAN ANGLE
Full Name (Last, First, Middle Initial)

Mailing Address 306 PENDLETON LANE

City PALM BEACH State FL Zip Code 33480-4105

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

Name of Employer: CHRISTIAN ANGLE REAL ESTATE Occupation: REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 03 / 31 / 2015
Transaction ID : SA12.727348.1.0315

Amount of Each Receipt this Period: 900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT D. ARNOTT
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 53725

City IRVINE State CA Zip Code 92619-3725

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

Name of Employer: RESEARCH AFFILIATES, LLC Occupation: CEO/CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt: 03 / 18 / 2015
Transaction ID : SA12.726691.1.0315

Amount of Each Receipt this Period: 2200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 191 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MARK M. BARBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1232 OXBRIDGE DRIVE
 City LUTZ State FL Zip Code 33549-9319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROAD AND CASSEL Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727096.1.0315
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. RONALD O. BAUKOL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9290 E. THOMPSON PEAK PKWY APT. 250
 City SCOTTSDALE State AZ Zip Code 85255-4512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726473.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. CAROL BAXTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 663 ISLAND DRIVE
 City PALM BEACH State FL Zip Code 33480-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727347.1.0315
 Amount of Each Receipt this Period 450.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 192 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. HAROLD J. BAXTER
Full Name (Last, First, Middle Initial)
Mailing Address 663 ISLAND DRIVE
City PALM BEACH State FL Zip Code 33480-4744
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727359.1.0315
Amount of Each Receipt this Period 450.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ORSON BEAN
Full Name (Last, First, Middle Initial)
Mailing Address 444 CARROLL CANAL
City VENICE State CA Zip Code 90291-4682
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation ACTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726718.1.0315
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. ROBERT A. BEHAR
Full Name (Last, First, Middle Initial)
Mailing Address 5100 SAN FELIPE UNIT 351E
City HOUSTON State TX Zip Code 77056-3711
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726087.1.0315
Amount of Each Receipt this Period 1500.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 193 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. PAUL F. BENNETT
Full Name (Last, First, Middle Initial)
Mailing Address 1312 OXFORD ROAD

City SAN MARINO	State CA	Zip Code 91108-2007
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FEC ID number of contributing federal political committee. **C**

Name of Employer UTILITY TRAILER MANUFACTURING COMPA	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726711.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ADAM BARNARD BERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1619 POE AVE

City SULLIVANS ISLAND	State SC	Zip Code 29482-8765
--------------------------	-------------	------------------------

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

Name of Employer MTAG SERVICES LLC	Occupation CHIEF OPERATING OFFICER
---------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA12.726083.1.0315

Amount of Each Receipt this Period

1080.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. WILLIAM H. BEST
Full Name (Last, First, Middle Initial)
Mailing Address 5055 LAKESHORE DRIVE

City COLUMBIA	State SC	Zip Code 29206-4902
------------------	-------------	------------------------

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

Name of Employer THERMAL ENGINEERING CORP.	Occupation ENGINEER
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA12.726474.1.0315

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 194 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. GORDON M. BINDER
Full Name (Last, First, Middle Initial)

Mailing Address 969 BUCKINGHAM PLACE

City PASADENA State CA Zip Code 91105-2205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA12.726710.1.0315

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. CHARLES R. BLACK
Full Name (Last, First, Middle Initial)

Mailing Address 601 N. FAIRFAX STREET APT. 602

City ALEXANDRIA State VA Zip Code 22314-2083

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

Name of Employer BKSH & ASSOCIATES Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727240.1.0315

Amount of Each Receipt this Period
 1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. DAVID S. BLATT
Full Name (Last, First, Middle Initial)

Mailing Address 101 N. WESTLAKE BLVD. STE. 201

City WESTLAKE VILLAGE State CA Zip Code 91362-7047

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

Name of Employer DSB PROPERTIES, INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA12.726709.1.0315

Amount of Each Receipt this Period
 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 195 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. IRMA BRAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 2060 BISCAYNE BLVD

City MIAMI	State FL	Zip Code 33137-5024
---------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727689.1.0315

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. NORMAN BRAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1 INDIAN CREEK ISLAND RD

City INDIAN CREEK VILLAGE	State FL	Zip Code 33154-2903
------------------------------	-------------	------------------------

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

Name of Employer BRAMAN AUTOMOTIVE	Occupation OWNER AUTO DEALERSHIPS
---------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SA12.693099.1.0315

Amount of Each Receipt this Period
-5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. NORMAN BRAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1 INDIAN CREEK ISLAND RD

City INDIAN CREEK VILLAGE	State FL	Zip Code 33154-2903
------------------------------	-------------	------------------------

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

Name of Employer BRAMAN AUTOMOTIVE	Occupation OWNER AUTO DEALERSHIPS
---------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727690.1.0315

Amount of Each Receipt this Period
3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 196 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ARTURO CARABALLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 11710 PLAZA AMERICA DRIVE
 SUITE 300
 City RESTON State VA Zip Code 20190-4745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VERIS Occupation PRESIDENT/GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA12.726560.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. PATRICK CARROLL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4041 BEECHWOOD DRIVE
 City ATLANTA State GA Zip Code 30327-3113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARROLL ORGANIZATION Occupation CHIEF EXECUTIVE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727090.1.0315
 Amount of Each Receipt this Period 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. ANN CHAFOULIAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 622 N. FLAGLER DRIVE
 City WEST PALM BEACH State FL Zip Code 33401-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727278.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 197 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. STEPHEN I. CHAZEN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1229

City State Zip Code
BELLAIRE TX 77402-1229

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

Name of Employer Occupation
OCCIDENTAL PETROLEUM CORPORATE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2015

Transaction ID : SA12.727089.1.0315

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ARTHUR B. CHOATE
Full Name (Last, First, Middle Initial)

Mailing Address 1390 S. DIXIE HIGHWAY STE. 2221

City State Zip Code
CORAL GABLES FL 33146-2946

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : SA12.727392.1.0315

Amount of Each Receipt this Period
-2500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. WILLIAM H. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 3716 MAPLEWOOD AVENUE

City State Zip Code
DALLAS TX 75205-2827

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA12.726792.1.0315

Amount of Each Receipt this Period
4050.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 198 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. JESSICA CORCORAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7746 STILL LAKES DRIVE
 City ODESSA State FL Zip Code 33556-2260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt: **03 / 27 / 2015**
Transaction ID : SA12.727080.1.0315
 Amount of Each Receipt this Period: **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL C. CORCORAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7746 STILL LAKES DRIVE
 City ODESSA State FL Zip Code 33556-2260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **CORCORAN & ASSOCIATES** Occupation: **POLITICAL CONSULTANT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **4600.00**

Date of Receipt: **03 / 27 / 2015**
Transaction ID : SA12.727079.1.0315
 Amount of Each Receipt this Period: **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. JANET H. COTTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7526 N. EUCALYPTUS DR.
 City PARADISE VALLEY State AZ Zip Code 85253-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 13 / 2015**
Transaction ID : SA12.726467.1.0315
 Amount of Each Receipt this Period: **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 199 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN C. COTTON
Full Name (Last, First, Middle Initial)

Mailing Address 7526 N. EUCALYPTUS DR.

City PARADISE VALLEY	State AZ	Zip Code 85253-3319
-------------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation BANKER
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA12.726469.1.0315

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DR. NEAL R. CUTLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 17300

City BEVERLY HILLS	State CA	Zip Code 90209-3300
-----------------------	-------------	------------------------

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

Name of Employer WCT, INC.	Occupation CEO
-------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726708.1.0315

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. EDWARD M. CZUKER
Full Name (Last, First, Middle Initial)

Mailing Address 121 S. BEVERLY DRIVE

City BEVERLY HILLS	State CA	Zip Code 90212-3002
-----------------------	-------------	------------------------

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

Name of Employer LEGADO COMPANIES	Occupation INVESTOR
--------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726707.1.0315

Amount of Each Receipt this Period

3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 200 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JUSTIN D. DALY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1301
 City State Zip Code
 GREAT FALLS VA 22066-8301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DALY CONSULTING GROUP LLC MANAGING PARTNER/OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727237.1.0315
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. J. MORTON DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 WALL STREET
 City State Zip Code
 NEW YORK NY 10005-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 D.H. BLAIR INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726694.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JAMES R. DAVIS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 455 OLD SCHOOL ROAD
 City State Zip Code
 GULF STREAM FL 33483-7415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BLUE SEA CAPITAL, L.L.C. PRIVATE BANKING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA12.726472.1.0315
 Amount of Each Receipt this Period
 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 201 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. LAWRENCE F. DE GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 INTRACOASTAL POINTE DRIVE
 SUITE 410
 City JUPITER State FL Zip Code 33477-5094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3240.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727337.1.0315
 Amount of Each Receipt this Period 3240.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JORGE R. DECARDENAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5125 DONATELLO STREET
 City CORAL GABLES State FL Zip Code 33146-2020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAUFMAN ROSSIN FUND SERVICES Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726480.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. DEE DECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 COMMODORE DRIVE
 City JUPITER State FL Zip Code 33477-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727292.1.0315
 Amount of Each Receipt this Period 900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 202 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MAKAN DELRAHIM

Mailing Address 2049 CENTURY PARK E. STE. 3550

City	State	Zip Code
LOS ANGELES	CA	90067-3210

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

Name of Employer	Occupation
BROWNSTEIN HYATT FARBER SCHRECK	ATTORNEY/SHAREHOLDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726662.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. THE HONORA WILLIAM J. DIAMOND

Mailing Address 220 WELLS ROAD

City	State	Zip Code
PALM BEACH	FL	33480-3625

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

Name of Employer	Occupation
160 E.89TH ST. REALTY CORP.	INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3660.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727266.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. JAMES K. DOBBS III

Mailing Address P.O. BOX 241750

City	State	Zip Code
MEMPHIS	TN	38124-1750

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

Name of Employer	Occupation
DOBBS BROTHER MANAGEMENT	PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727354.1.0315

Amount of Each Receipt this Period

1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 203 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. JOHN DONAHUE

Mailing Address 100 BAY RD

City State Zip Code
NAPLES FL 34102-7902

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

Name of Employer Occupation
FEDERATED INVESTORS CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1420.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : SA12.727691.1.0315

Amount of Each Receipt this Period
1420.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. DR. CURTIS D. EMMER

Mailing Address 249 SEMINOLE AVENUE

City State Zip Code
PALM BEACH FL 33480-3734

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

Name of Employer Occupation
EAR, NOSE AND THROAT ASSOCIATES OF SOUTH PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2015

Transaction ID : SA12.726485.1.0315

Amount of Each Receipt this Period
1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. BRYAN EZRALOW

Mailing Address 23622 CALABASAS ROAD

City State Zip Code
CALABASAS CA 91302-1549

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

Name of Employer Occupation
THE EZRALOW COMPANY REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SA12.727284.1.0315

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 204 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. EMILIA FANJUL

Mailing Address 105 JUNGLE ROAD

City PALM BEACH State FL Zip Code 33480-4809

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3120.00

Date of Receipt
03 / 27 / 2015
Transaction ID : SA12.726993.1.0315

Amount of Each Receipt this Period
3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. J. PEPE FANJUL

Mailing Address 1 NORTH CLEMATIS STREET

City WEST PALM BEACH State FL Zip Code 33401-5550

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

Name of Employer SELF Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3120.00

Date of Receipt
03 / 27 / 2015
Transaction ID : SA12.726987.1.0315

Amount of Each Receipt this Period
3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MS. BETH FARRIS

Mailing Address 220 MOCKINGBIRD TRAIL

City PALM BEACH State FL Zip Code 33480-3118

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

Name of Employer SELF-EMPLOYED Occupation PRIVATE INVETOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
03 / 31 / 2015
Transaction ID : SA12.727295.1.0315

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 205 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. TERRI H. FECHTEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 531 E. COUNTY LINE ROAD
 City LUTZ State FL Zip Code 33549-4145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FF AGRICO, LLC Occupation PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727094.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DAVID L. FERGUSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 11840 SW 26TH COURT
 City DAVIE State FL Zip Code 33330-1326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE KOPELOWITZ OSTROW FIRM, P.A. Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727282.1.0315
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MIQUEL FERNANDEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2515 MOUNT CLAIRE CIRCLE
 City WESTON State FL Zip Code 33327-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AXIS HEALTHCARE Occupation HEALTHCARE PROVIDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726089.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 206 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. BETH FRIEDMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2000 AVENUE OF THE STARS

City LOS ANGELES State CA Zip Code 90067-4700

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : **SA12.727352.1.0315**

Amount of Each Receipt this Period: **5000.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOSHUA S. FRIEDMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2000 AVENUE OF THE STARS

City LOS ANGELES State CA Zip Code 90067-4700

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

Name of Employer: **CANYON CAPITAL PARTNERS** Occupation: **INVESTMENT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : **SA12.727332.1.0315**

Amount of Each Receipt this Period: **5000.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. KAREN GABRIEL
Full Name (Last, First, Middle Initial)

Mailing Address 1760 VOORHEES AVENUE

City MANHATTAN BEACH State CA Zip Code 90266-7046

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

Name of Employer: **SELF-EMPLOYED** Occupation: **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt: **03 / 19 / 2015**
Transaction ID : **SA12.726783.1.0315**

Amount of Each Receipt this Period: **600.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 207 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. THE HON. GAY HART GAINES

Mailing Address **2 N. BREAKERS ROW
APARTMENT N35**

City **PALM BEACH** State **FL** Zip Code **33480-3986**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA12.727271.1.0315

Amount of Each Receipt this Period **3240.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MR. STANLEY N. GAINES

Mailing Address **2 N. BREAKERS ROW APT. N35**

City **PALM BEACH** State **FL** Zip Code **33480-3986**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA12.727267.1.0315

Amount of Each Receipt this Period **3240.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. NORMAN W. GAVIN

Mailing Address **364 EAGLE DRIVE**

City **JUPITER** State **FL** Zip Code **33477-4066**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA12.727264.1.0315

Amount of Each Receipt this Period **900.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 208 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MICHAEL J. GAZZOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3406 WHISPERING GLEN COURT
 City State Zip Code
 SIMI VALLEY CA 93065-0597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED REAL ESTATE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727296.1.0315
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. EMANUEL E. GEDULD
 Full Name (Last, First, Middle Initial)
 Mailing Address 279 CENTRAL PARK WEST, 12A
 City State Zip Code
 NEW YORK NY 10019-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA12.727088.1.0315
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ANTHONY GERBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 9951 BEVERLY GROVE DRIVE
 City State Zip Code
 BEVERLY HILLS CA 90210-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726689.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 209 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. LINDA GERBER
Full Name (Last, First, Middle Initial)

Mailing Address 9951 BEVERLY GROVE DRIVE

City BEVERLY HILLS State CA Zip Code 90210-2121

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA12.726687.1.0315

Amount of Each Receipt this Period
 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. GARRETT L. GERSON
Full Name (Last, First, Middle Initial)

Mailing Address 327 S. LATIGO CANYON ROAD

City MALIBU State CA Zip Code 90265-2708

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

Name of Employer SANTA MONICA RESTAURANT Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727351.1.0315

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. RONALD J. GIDWITZ
Full Name (Last, First, Middle Initial)

Mailing Address 200 S. WACKER DRIVE

City CHICAGO State IL Zip Code 60606-5829

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

Name of Employer G.C.C. PARTNERS Occupation PRINCIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2014

Transaction ID : SA12.721763.1.0315

Amount of Each Receipt this Period
 1040.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. AMBASSADOR ANTHONY H. GIOIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 925 DELAWARE AVE APT 7D
 City State Zip Code
 BUFFALO NY 14209-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GIOIA MANAGEMENT CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA12.727614.1.0315
 Amount of Each Receipt this Period
 -320.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. DONNA M. GIOIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 925 DELAWARE AVE APT 7D
 City State Zip Code
 BUFFALO NY 14209-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA12.727613.1.0315
 Amount of Each Receipt this Period
 500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MARC S. GOLDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 8020
 City State Zip Code
 GARDEN CITY NY 11530-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727277.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 211 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MR. JULIO P. GONZALEZ		Date of Receipt
Mailing Address 7 DOKE DRIVE		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAKE WORTH	FL	33460-6363
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA12.726486.1.0315
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS	<input type="text" value="900.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	TRANSFER
	<input type="text" value="900.00"/>	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) B. DR. GERALD GROSSMAN		Date of Receipt
Mailing Address 8 BENSIN DR		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2015"/>
City	State	Zip Code
MELVILLE	NY	11747-2314
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA12.726684.1.0315
Name of Employer	Occupation	Amount of Each Receipt this Period
BEVERLY HOSPITAL	RADIOLOGIST, M.D.	<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	TRANSFER
	<input type="text" value="300.00"/>	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) C. MRS. LINDA GROSSMAN		Date of Receipt
Mailing Address 369 19TH STREET		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2015"/>
City	State	Zip Code
SANTA MONICA	CA	90402-2409
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA12.726688.1.0315
Name of Employer	Occupation	Amount of Each Receipt this Period
HOMEMAKER	HOMEMAKER	<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	TRANSFER
	<input type="text" value="300.00"/>	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 212 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. DAN L. GRUBB

Mailing Address P.O. BOX 44265

City State Zip Code
PHOENIX AZ 85064-4265

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
03 / 13 / 2015
Transaction ID : SA12.726481.1.0315

Amount of Each Receipt this Period
900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MR. JEFFREY HAINES

Mailing Address 241 N. ROCKINGHAM AVENUE

City State Zip Code
LOS ANGELES CA 90049-2633

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

Name of Employer Occupation
OVATION MEDICAL CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 18 / 2015
Transaction ID : SA12.726678.1.0315

Amount of Each Receipt this Period
2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. RICHARD K. HARRISON

Mailing Address 713 LAS VEGAS BLVD. S.

City State Zip Code
LAS VEGAS NV 89101-6755

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

Name of Employer Occupation
GOLD & SILVER COIN SHOP ACTOR/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 12 / 2015
Transaction ID : SA12.726450.1.0315

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 213 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT V. HARTWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1219 3RD STREET DRIVE EAST

City PALMETTO	State FL	Zip Code 34221-5130
------------------	-------------	------------------------

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

Name of Employer HARTWELL CAPITAL CONSULTING	Occupation PRESIDENT
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727242.1.0315

Amount of Each Receipt this Period

1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. THOMAS A. HAWKS
Full Name (Last, First, Middle Initial)

Mailing Address 1718 D ST NE

City WASHINGTON	State DC	Zip Code 20002-6610
--------------------	-------------	------------------------

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

Name of Employer MONUMENT POLICY GROUP	Occupation PRINCIPAL/LOBBYIST
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2015

Transaction ID : SA12.726849.1.0315

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. BEN HELLER
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 320825

City ALEXANDRIA	State VA	Zip Code 22320-4825
--------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726714.1.0315

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. MR. JOHN D. HEUBUSCH
Full Name (Last, First, Middle Initial)

Mailing Address 3870 PRADO DE LA MARIPOSA

City CALABASAS State CA Zip Code 91302-3605

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

Name of Employer RONALD REAGAN PRESIDENTIAL FOUNDAT Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA12.726706.1.0315

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. DIANA F. HOBSON
Full Name (Last, First, Middle Initial)

Mailing Address 420 E. 58TH STREET APT. 24A

City NEW YORK State NY Zip Code 10022-2348

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

Name of Employer SELF-EMPLOYED Occupation ARTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA12.726675.1.0315

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. NANCY L. IREDALE
Full Name (Last, First, Middle Initial)

Mailing Address 515 S. FLOWER STREET

City LOS ANGELES State CA Zip Code 90071-2201

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

Name of Employer PAUL HASTINGS Occupation TAX LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA12.726696.1.0315

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 215 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. MARK JASON

Mailing Address 20384 SEABOARD ROAD

City MALIBU State CA Zip Code 90265-5348

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

Name of Employer ITIG Occupation TAX ECONOMIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727404.1.0315

Amount of Each Receipt this Period
 1800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. AMBASSADOR ERIC M. JAVITS

Mailing Address 150 BRADLEY PLACE #407

City PALM BEACH State FL Zip Code 33480-3836

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727289.1.0315

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. FRANKLIN P. JOHNSON

Mailing Address 1411 EDGEWOOD DRIVE

City PALO ALTO State CA Zip Code 94301-3118

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

Name of Employer ASSET MANAGEMENT COMPANY Occupation SOLE PROPRIETOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727393.1.0315

Amount of Each Receipt this Period
 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 216 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DARLENE L. JORDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 S. LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HELLMAN JORDAN Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727238.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. GREGORY I. KATZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 508 SE 28TH AVE
 City POMPANO BEACH State FL Zip Code 33062-6132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NEWMARK Occupation REAL ESTATE ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726088.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. KEVIN M. KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 HAMPTON CIRCLE
 City JUPITER State FL Zip Code 33458-8122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEASIDE BANK Occupation BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726476.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. MS. JORIE BUTLER KENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 349 CHILEAN AVENUE
 City PALM BEACH State FL Zip Code 33480-4631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ABERCROMBIE & KENT Occupation VICE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727265.1.0315
 Amount of Each Receipt this Period **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. CODY KHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 243 EAGLE DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32407-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HILTON INN RESORT Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **01 / 09 / 2015**
Transaction ID : SA12.723508.1.0315
 Amount of Each Receipt this Period **100.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. MICHAEL E. KIEPURA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1750 LAZY RIVER LANE
 City ATLANTA State GA Zip Code 30350-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROCKTOWN COMPANY Occupation PRESIDENT, PACKAGE SOLUTIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1620.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727400.1.0315
 Amount of Each Receipt this Period **1620.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 218 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. LORALEE KNOTTS-MURAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 535 OCEAN AVENUE
 City SANTA MONICA State CA Zip Code 90402-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726700.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. W. ROBERT KOHORST
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 HUNTINGTON CIRCLE
 City PASADENA State CA Zip Code 91106-4510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EVEREST PROPERTIES Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727302.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT L. KONRAD JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11884 WINDMILL LAKE DRIVE
 City BOYNTON BEACH State FL Zip Code 33473-7846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALTERNA FINANCIAL, L.L.C. Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726471.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 219 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN KREUTZER
Full Name (Last, First, Middle Initial)
Mailing Address 5417 BLUE DOG ROAD

City PANAMA CITY	State FL	Zip Code 32404-6032
---------------------	-------------	------------------------

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

Name of Employer RSSI BARRIERS, LLC	Occupation EXECUTIVE
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2015

Transaction ID : SA12.727233.1.0315

Amount of Each Receipt this Period

240.00

TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. TOVA LEIDESDORF
Full Name (Last, First, Middle Initial)
Mailing Address 44 COCOANUT ROW #420A

City PALM BEACH	State FL	Zip Code 33480-4069
--------------------	-------------	------------------------

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

Name of Employer DIABETES RESEARCH	Occupation PHILANTHROPIST
---------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727281.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JOHN A. LEONE
Full Name (Last, First, Middle Initial)
Mailing Address 79 W. MARKET STREET

City BETHLEHEM	State PA	Zip Code 18018-5736
-------------------	-------------	------------------------

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

Name of Employer BONNEY FORGE CORPORATION	Occupation CEO
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727280.1.0315

Amount of Each Receipt this Period

900.00

TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 220 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ARIEL S. LEVY
Full Name (Last, First, Middle Initial)

Mailing Address 11878 WINDMILL LAKE DRIVE

City BOYNTON BEACH	State FL	Zip Code 33473-7846
-----------------------	-------------	------------------------

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

Name of Employer GLOBAL PRINCIPAL PARTNERS, L.L.C.	Occupation INVESTMENT BANKING
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA12.726475.1.0315

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JORGE LUIS LOPEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1889 S. BAYSHORE DRIVE

City MIAMI	State FL	Zip Code 33133-3307
---------------	-------------	------------------------

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

Name of Employer JORGE LUIS LOPEZ LAW FIRM, LLC	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA12.726859.1.0315

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. MARILE LOPEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1889 S. BAYSHORE DRIVE

City MIAMI	State FL	Zip Code 33133-3307
---------------	-------------	------------------------

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

Name of Employer LOPEZ LAW FIRM, LLC	Occupation C.F.O.
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA12.726858.1.0315

Amount of Each Receipt this Period

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 221 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. JENNIFER LUKAWSKI
Full Name (Last, First, Middle Initial)

Mailing Address 8704 PLYMOUTH ROAD

City ALEXANDRIA State VA Zip Code 22308-2509

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

Name of Employer BGR GROUP Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1810.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727368.1.0315

Amount of Each Receipt this Period 810.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. SCOTT H. LUSTGARTEN
Full Name (Last, First, Middle Initial)

Mailing Address 418 HILLBROOK ROAD

City BRYN MAWR State PA Zip Code 19010-3634

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

Name of Employer MAIN LINE HONDA Occupation DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727333.1.0315

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. PATRICIA A. LYSIK
Full Name (Last, First, Middle Initial)

Mailing Address 434 CHURCH HILL RD

City TRUMBULL State CT Zip Code 06611-3839

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726018.1.0315

Amount of Each Receipt this Period 21.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 222 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. STEVEN H. MADDEN
Full Name (Last, First, Middle Initial)

Mailing Address 9821 KATY FREEWAY, SUITE 880

City HOUSTON	State TX	Zip Code 77024-1235
-----------------	-------------	------------------------

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

Name of Employer APEX HERITAGE GROUP	Occupation MANAGEMENT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727396.1.0315

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. PETER T. MADIGAN
Full Name (Last, First, Middle Initial)

Mailing Address 903 VICAR LANE

City ALEXANDRIA	State VA	Zip Code 22302-3422
--------------------	-------------	------------------------

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

Name of Employer PECK, MADIGAN, JONES AND STEWART INC	Occupation PARTNER
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2015

Transaction ID : SA12.726847.1.0315

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. CHRISTOPHER N. MADISON
Full Name (Last, First, Middle Initial)

Mailing Address 969 COLORADO BLVD. #206

City LOS ANGELES	State CA	Zip Code 90041-1715
---------------------	-------------	------------------------

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

Name of Employer SIERRA NEVADA INVESTMENT	Occupation CHAIRMAN
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726695.1.0315

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 223 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT A. MAGINN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 HUNTINGTON AVENUE
 SUITE 2205
 City BOSTON State MA Zip Code 02199-7603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JENZABAR, INC. Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727076.1.0315
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. HUNG T. MAI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4325 BEAU RIVAGE CIRCLE
 City LUTZ State FL Zip Code 33558-5353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer H.T. MAI, INC. Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727083.1.0315
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. LAURA MARCHETTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 SUGAR LOAF LANE
 City VALRICO State FL Zip Code 33596-6068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE KATIE MARCHETTI FOUNDATION Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727092.1.0315
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 224 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD A. MARGOLIS
Full Name (Last, First, Middle Initial)

Mailing Address 23405 MALIBU COLONY DRIVE

City MALIBU	State CA	Zip Code 90265-4640
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FEC ID number of contributing federal political committee. **C**

Name of Employer COLUMBUS PACIFIC PROPERTIES	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727275.1.0315

Amount of Each Receipt this Period

2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. JOYCELYN W. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 389 S. LAKE DRIVE
APARTMENT 5A

City PALM BEACH	State FL	Zip Code 33480-4556
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727270.1.0315

Amount of Each Receipt this Period

450.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ROBIN B. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 389 S. LAKE DRIVE
APARTMENT 5A

City PALM BEACH	State FL	Zip Code 33480-4556
--------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727286.1.0315

Amount of Each Receipt this Period

450.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 225 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOSEPH MARZOUCA
Full Name (Last, First, Middle Initial)

Mailing Address 331 CHARROUX DRIVE

City PALM BEACH GARDENS State FL Zip Code 33410-1615

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

Name of Employer FLORIDIAN COMMUNITY BANK Occupation BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726085.1.0315

Amount of Each Receipt this Period 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. CARLYN MAYER
Full Name (Last, First, Middle Initial)

Mailing Address 7098 AYSHIRE LANE

City BOCA RATON State FL Zip Code 33496-1416

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.727622.1.0315

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. LOTHAR MAYER
Full Name (Last, First, Middle Initial)

Mailing Address 7098 AYRSHIRE LANE

City BOCA RATON State FL Zip Code 33496-1416

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.727623.1.0315

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 226 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. SHARON P. MCQUILLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4150 SW 28 WAY
 City FT. LAUDERDALE State FL Zip Code 33312-5201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREAT HEALTH WORKS Occupation DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727339.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. KEN MEARES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4150 SW 28 WAY
 City FORT LAUDERDALE State FL Zip Code 33312-5201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREAT HEALTH WORKS Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727329.1.0315
 Amount of Each Receipt this Period 3240.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JAMES PATRICK MEEKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4316 SAVOY STREET
 City MOUNT PLEASANT State SC Zip Code 29466-7162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MTAG SERVICES LLC Occupation PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726084.1.0315
 Amount of Each Receipt this Period 1050.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 227 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. JUDY LARINA MEEKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4316 SAVOY STREET
 City MOUNT PLEASANT State SC Zip Code 29466-7162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MTAG SERVICES, LLC Occupation FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726082.1.0315
 Amount of Each Receipt this Period 1050.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. DIANE M. MENDEZ-PADEFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 18104 S. SUMMER AVENUE
 City ARTESIA State CA Zip Code 90701-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726705.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. WILLIAM RYAN METZLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6811 N. DESERT FAIRWAYS DRIVE
 City PARADISE VALLEY State AZ Zip Code 85253-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEST COAST CAPITAL Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.726192.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 228 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. ALLEY MILLS
Full Name (Last, First, Middle Initial)
Mailing Address 444 CARROLL CANAL

City VENICE	State CA	Zip Code 90291-4682
----------------	-------------	------------------------

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

Name of Employer CBS-BELL TELEVISION	Occupation ACTRESS
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726716.1.0315

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. GILA MILSTEIN
Full Name (Last, First, Middle Initial)
Mailing Address 3930 VALLEY MEADOW ROAD

City ENCINO	State CA	Zip Code 91436-3930
----------------	-------------	------------------------

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

Name of Employer MILSTEIN FAMILY FOUNDATION	Occupation PHILANTHROPIST
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726661.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. LAWRENCE A. MOENS
Full Name (Last, First, Middle Initial)
Mailing Address 1480 NORTH LAKE WAY

City PALM BEACH	State FL	Zip Code 33480-3031
--------------------	-------------	------------------------

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

Name of Employer LAWRENCE A. MOENS ASSOCIATES	Occupation REAL ESTATE BROKER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727323.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. DR. IRMA MORALES
Full Name (Last, First, Middle Initial)
Mailing Address 215 S. COUNTY ROAD
City PALM BEACH State FL Zip Code 33480-4290
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation VETERINARIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727294.1.0315
Amount of Each Receipt this Period 900.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. EDWARD MULLEN
Full Name (Last, First, Middle Initial)
Mailing Address 5592 WHIRLAWAY ROAD
City PALM BEACH GARDENS State FL Zip Code 33418-7735
FEC ID number of contributing federal political committee. **C**
Name of Employer JATEM CAPITAL Occupation INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726468.1.0315
Amount of Each Receipt this Period 1560.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JOHN MUMFORD
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 486
City SAN BRUNO State CA Zip Code 94066-0486
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727394.1.0315
Amount of Each Receipt this Period 3120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 230 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. DR. HOWARD MURAD
Full Name (Last, First, Middle Initial)
Mailing Address 535 OCEAN AVENUE
City SANTA MONICA State CA Zip Code 90402-2610
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726717.1.0315
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. CLAUDIA NAVARRO
Full Name (Last, First, Middle Initial)
Mailing Address 7000 SW 97TH AVENUE #201
City MIAMI State FL Zip Code 33173-1492
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 4697.27

Date of Receipt 01 / 15 / 2015
Transaction ID : SA12.72620.1.0315
Amount of Each Receipt this Period 360.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. SHERYL S. NEUPERT
Full Name (Last, First, Middle Initial)
Mailing Address 1603 EVERGREEN PT. ROAD
City MEDINA State WA Zip Code 98039-2326
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726478.1.0315
Amount of Each Receipt this Period 5000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 231 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT P. NICKELL
Full Name (Last, First, Middle Initial)

Mailing Address 381 VAN NESS AVENUE #1504

City TORRANCE State CA Zip Code 90501-7217

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726660.1.0315

Amount of Each Receipt this Period
 1200.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. PHILIP NICOZISIS
Full Name (Last, First, Middle Initial)

Mailing Address 201 S. NARCISSUS AVENUE #605

City WEST PALM BEACH State FL Zip Code 33401-5697

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727290.1.0315

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. SUZANNE L. NIEDLAND
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1748

City JUPITER State FL Zip Code 33468-1748

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

Name of Employer SELF-EMPLOYED Occupation PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727325.1.0315

Amount of Each Receipt this Period
 3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 232 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. DORIS NOUR-DMID
Full Name (Last, First, Middle Initial)
Mailing Address 2219 TUNBRIDGE COURT

City LOS ANGELES	State CA	Zip Code 90077-1351
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726659.1.0315

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. ELIZABETH OLESON
Full Name (Last, First, Middle Initial)
Mailing Address 807 4TH ST

City KALONA	State IA	Zip Code 52247-9484
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA12.726144.1.0315

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MANDELL J. OURISMAN
Full Name (Last, First, Middle Initial)
Mailing Address 300 REGENTS PARK ROAD

City PALM BEACH	State FL	Zip Code 33480-5014
--------------------	-------------	------------------------

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

Name of Employer OURISMAN AUTOMOTIVE ENTERPRISES	Occupation AUTOMOTIVE DEALER
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727283.1.0315

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 233 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. THE HONORA MARY M. OURISMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 REGENTS PARK ROAD
 City PALM BEACH State FL Zip Code 33480-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727287.1.0315
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MS. BETH PALMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 26885 MULHOLLAND HIGHWAY
 City CALABASAS State CA Zip Code 91302-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MALIBU VALLEY FARMS Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727299.1.0315
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ADAM S. PARIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1888 CENTURY PARK E. STE. 2100
 City LOS ANGELES State CA Zip Code 90067-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SULLIVAN & CROMWELL LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726697.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 234 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. AKASHI PATIDAR
Full Name (Last, First, Middle Initial)
Mailing Address 1606 OAKFIELD DR

City BRANDON	State FL	Zip Code 33511-0806
-----------------	-------------	------------------------

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

Name of Employer DIVINE DESIGNS SALON & SPA	Occupation OWNER
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA12.727097.1.0315

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. DOROTHY A. PATTERSON
Full Name (Last, First, Middle Initial)
Mailing Address 215 5TH STREET

City WEST PALM BEACH	State FL	Zip Code 33401-4030
-------------------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727331.1.0315

Amount of Each Receipt this Period
3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JAMES A. PATTERSON
Full Name (Last, First, Middle Initial)
Mailing Address 215 5TH STREET
SUITE 100

City WEST PALM BEACH	State FL	Zip Code 33401-4026
-------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727338.1.0315

Amount of Each Receipt this Period
3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 235 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. PAULINE B. PITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 TANGIER AVENUE
 City PALM BEACH State FL Zip Code 33480-3518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation INTERIOR DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727334.1.0315
 Amount of Each Receipt this Period 900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JOHN J. POHANKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1772 RITCHIE STATION COURT
 City CAPITOL HEIGHTS State MD Zip Code 20743-5065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer POHANKA AUTOMOTIVE Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727356.1.0315
 Amount of Each Receipt this Period 450.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. LYNN POHANKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 369 S. LAKE DRIVE
 City PALM BEACH State FL Zip Code 33480-4571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727341.1.0315
 Amount of Each Receipt this Period 450.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 236 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. LOIS POPE
Full Name (Last, First, Middle Initial)
Mailing Address 1720 S. OCEAN BLVD.
City MANALAPAN State FL Zip Code 33462-6222
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PHILANTHROPIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727279.1.0315
Amount of Each Receipt this Period **600.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. HARVEY POPPEL
Full Name (Last, First, Middle Initial)
Mailing Address 110 EL MIRA SOL
City PALM BEACH State FL Zip Code 33480-3611
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **900.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727291.1.0315
Amount of Each Receipt this Period **900.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ERNEST M. POSEY
Full Name (Last, First, Middle Initial)
Mailing Address 930 CORAL DRIVE
City PEBBLE BEACH State CA Zip Code 93953-2503
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3000.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727349.1.0315
Amount of Each Receipt this Period **3000.00**
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 237 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. SREEDHAR V. POTARAZU
Full Name (Last, First, Middle Initial)

Mailing Address 10904 LAMPLIGHTER LANE

City POTOMAC State MD Zip Code 20854-2783

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

Name of Employer VITAL SPRING Occupation PRESIDENT & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727402.1.0315

Amount of Each Receipt this Period 3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. TINA PRICE
Full Name (Last, First, Middle Initial)

Mailing Address 15 HEATHCOTE RD

City SCARSDALE State NY Zip Code 10583-4415

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 19 / 2015
Transaction ID : SA12.726780.1.0315

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. BALAJI S. RAJAN
Full Name (Last, First, Middle Initial)

Mailing Address 490 ETON DRIVE

City NORTH BARRINGTON State IL Zip Code 60010-2152

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

Name of Employer CEANNATE CORPORATION Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4960.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA12.725720.1.0315

Amount of Each Receipt this Period 400.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 238 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN G. RANGOS SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 OSPREY POINT CIRCLE
 City BOCA RATON State FL Zip Code 33431-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727324.1.0315
 Amount of Each Receipt this Period **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. SAM RASHID
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O.BOX 2190
 City BRANDON State FL Zip Code 33509-2190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOLTEC USA Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : SA12.727084.1.0315
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. DANIEL D. RAULERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 ASTON AVE
 City PLANT CITY State FL Zip Code 33566-9301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EDWARDS, PLATT, RAULERSON Occupation CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **03 / 27 / 2015**
Transaction ID : SA12.727081.1.0315
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 239 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DEAN A. RIESEN
Full Name (Last, First, Middle Initial)

Mailing Address **BOX 25040**

City **SCOTTSDALE** State **AZ** Zip Code **85255-0100**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	1	5

Transaction ID : SA12.726479.1.0315

Amount of Each Receipt this Period

6	0	0	0	0	0	0	0	0	0

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. DAVID N. ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address **998 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10028-0102**

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

Name of Employer **ANGELA GORLON** Occupation **INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

Transaction ID : SA12.727403.1.0315

Amount of Each Receipt this Period

5	0	0	0	0	0	0	0	0	0

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. DEBORAH L. ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address **998 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10028-0102**

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

Name of Employer **J. HILBURN MEN'S CLOTHIER** Occupation **ASSOCIATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

Transaction ID : SA12.727398.1.0315

Amount of Each Receipt this Period

5	0	0	0	0	0	0	0	0	0

5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 240 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. EDWARD J. ROBSON
Full Name (Last, First, Middle Initial)
Mailing Address 9532 E. RIGGS ROAD
City SUN LAKES State AZ Zip Code 85248-7463
FEC ID number of contributing federal political committee. **C**
Name of Employer ROBSON COMMUNITIES Occupation CHAIRMAN & C.E.O.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727082.1.0315
Amount of Each Receipt this Period 1560.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. PHILLIP ROMAN
Full Name (Last, First, Middle Initial)
Mailing Address 5670 WILSHIRE BLVD. STE 2420
City LOS ANGELES State CA Zip Code 90036-5605
FEC ID number of contributing federal political committee. **C**
Name of Employer PHILLIP ROMAN & COMPANY Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727366.1.0315
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. ALEXANDER S. ROSEMURGY II
Full Name (Last, First, Middle Initial)
Mailing Address 300 NE 4TH STREET
City BOCA RATON State FL Zip Code 33432-4036
FEC ID number of contributing federal political committee. **C**
Name of Employer FLORIDA HOSPITAL Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726470.1.0315
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 241 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DANIEL S. ROSENBAUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 11962 WATERWOOD DRIVE
 City BOCA RATON State FL Zip Code 33428-1026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROSENBAUM MOLLENGARDEN PLLC Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727273.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. WILBUR L. ROSS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 328 EL VEDADO RD
 City PALM BEACH State FL Zip Code 33480-4736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer W. L. ROSS & COMPANY LLC Occupation PRIVATE EQUITY INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727353.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. HOWARD S. ROWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 TOYOPA DRIVE
 City PACIFIC PALISADES State CA Zip Code 90272-4470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MERRILL LYNCH Occupation FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726656.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 242 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. HOWARD S. ROWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 TOYOPA DRIVE
 City State Zip Code
 PACIFIC PALISADES CA 90272-4470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MERRILL LYNCH FINANCIAL ADVISOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726657.1.0315
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. ANNE M. RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 PENNOCK POINT RD
 City State Zip Code
 JUPITER FL 33458-3448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2015
Transaction ID : SA12.726237.1.0315
 Amount of Each Receipt this Period
 330.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JOHN CLEMENS RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11516 W. 183RD STREET
 City State Zip Code
 ORLAND PARK IL 60467-9455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 22 CENTURY MEDIA PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726701.1.0315
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 243 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JON A. SALE
Full Name (Last, First, Middle Initial)
Mailing Address 3281 NE 165 STREET
City NORTH MIAMI BEACH State FL Zip Code 33160-3833
FEC ID number of contributing federal political committee. **C**
Name of Employer SALE & WEINTRAUB Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726477.1.0315
Amount of Each Receipt this Period 1500.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL H. SAMSOR
Full Name (Last, First, Middle Initial)
Mailing Address 619 47TH AVENUE
City SAN FRANCISCO State CA Zip Code 94121-2407
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PRIVATE MONEY LENDER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727395.1.0315
Amount of Each Receipt this Period 900.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. ELLEN SANDLER
Full Name (Last, First, Middle Initial)
Mailing Address 121 S. CARMELINA AVENUE
City LOS ANGELES State CA Zip Code 90049-3901
FEC ID number of contributing federal political committee. **C**
Name of Employer HOMEMAKER Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726703.1.0315
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 244 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD V. SANDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1250 4TH STREET
 City SANTA MONICA State CA Zip Code 90401-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MARON & SANDLER Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726702.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. FRED C. SANDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 11611 SAN VICENTE BLVD. SUITE 1000
 City LOS ANGELES State CA Zip Code 90049-6524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VINTAGE CAPITAL GROUP INVESTMENT FIRM Occupation HEAD OF REAL ESTATE INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726655.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ANDY JOE SCAGLIONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3802 EHRLICH ROAD #106
 City TAMPA State FL Zip Code 33624-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EMPIRE COMMERCIAL RLTY.,SERV. Occupation REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727093.1.0315
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 245 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DWIGHT C. SCHAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 S OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727326.1.0315
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DAVID W. SCHEIBLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3565 TUXEDO ROAD
 City ATLANTA State GA Zip Code 30305-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GRAPHIC PACKAGING Occupation CHAIRMAN/PRESIDENT/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3240.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727399.1.0315
 Amount of Each Receipt this Period **3240.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MARNA D. SCHNABEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 162 S. BURLINGAME AVENUE
 City LOS ANGELES State CA Zip Code 90049-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 18 / 2015**
Transaction ID : SA12.726704.1.0315
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 246 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BURTON R. SCHOOLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 COOPER RIVER DRIVE
 City MOUNT PLEASANT State SC Zip Code 29464-1813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 03 / 30 / 2015
Transaction ID : SA12.727123.1.0315
 Amount of Each Receipt this Period 264.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DOUGLAS H. SCHWARTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1348 CONSTITUTION AVENUE NE
 City WASHINGTON State DC Zip Code 20002-6467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CGCN GROUP Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2015
Transaction ID : SA12.726848.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. RAY MICHAEL SENKOWSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9559 BELL DR
 City GREAT FALLS State VA Zip Code 22066-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN LLP Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 06 / 06 / 2014
Transaction ID : SA12.689690.1.0315
 Amount of Each Receipt this Period 2000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. MR. RAY MICHAEL SENKOWSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9559 BELL DR
 City State Zip Code
 GREAT FALLS VA 22066-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILEY REIN LLP ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2015
Transaction ID : SA12.725461.1.0315
 Amount of Each Receipt this Period
 1600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. JERI SHAPIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 14225 VENTURA BLVD. #100
 City State Zip Code
 SHERMAN OAKS CA 91423-2758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WOODBRIDGE STRUCTURED FUNDING, LLC EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726685.1.0315
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT SHAPIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 14225 VENTURA BLVD. STE. 100
 City State Zip Code
 SHERMAN OAKS CA 91423-2758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WOODBRIDGE STRUCTURED FUNDING PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726677.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 248 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JESSE SHARF
Full Name (Last, First, Middle Initial)

Mailing Address 468 21ST STREET

City SANTA MONICA State CA Zip Code 90402-2436

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

Name of Employer GIBSON DUNN Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727350.1.0315

Amount of Each Receipt this Period
 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. JANE SHIPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 442 SEASPRAY AVENUE

City PALM BEACH State FL Zip Code 33480-4108

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727343.1.0315

Amount of Each Receipt this Period
 450.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ROBERT SHIPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 442 SEASPRAY AVENUE

City PALM BEACH State FL Zip Code 33480-4108

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

Name of Employer THE BALM COSMETICS Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA12.727357.1.0315

Amount of Each Receipt this Period
 450.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 249 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. KERN SHUMACHER
Full Name (Last, First, Middle Initial)

Mailing Address 2200 E. CAMELBACK SUITE 101

City PHOENIX	State AZ	Zip Code 85016-3455
-----------------	-------------	------------------------

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

Name of Employer A. & K. RAILROD	Occupation OWNER
-------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA12.727085.1.0315

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. PATRICIA E. SIMMONS
Full Name (Last, First, Middle Initial)

Mailing Address 3957 PARADISE VIEW DRIVE

City PARADISE VALLEY	State AZ	Zip Code 85253-3808
-------------------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA12.726465.1.0315

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. GARY SIMONS
Full Name (Last, First, Middle Initial)

Mailing Address 5811 ROUND MEADOW ROAD

City HIDDEN HILLS	State CA	Zip Code 91302-1287
----------------------	-------------	------------------------

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

Name of Employer UPSIDE INVESTMENTS, INC.	Occupation REAL ESTATE DEVELOPER
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA12.726856.1.0315

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 250 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. HAROLD B. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 W. MADISON STREET STE. 3400
 City CHICAGO State IL Zip Code 60606-3600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727293.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. DEBRA STEINHARDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 17732 MELVIN LANE
 City NORTHRIDGE State CA Zip Code 91325-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HYDRO SYSTEMS Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726680.1.0315
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JOHN STEINHARDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 791 PARK AVENUE 11B
 City NEW YORK State NY Zip Code 10021-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer K.L.S. DIVERSIFIED Occupation MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 27 / 2015
Transaction ID : SA12.727075.1.0315
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 251 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. LINDA STOCH
Full Name (Last, First, Middle Initial)
Mailing Address 104 VINTAGEISLE LANE
City PALM BEACH GARDENS State FL Zip Code 33418-4603
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727300.1.0315
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. BURT SUGARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9440 SANTA MONICA BLVD. STE. 407
City BEVERLY HILLS State CA Zip Code 90210-4607
FEC ID number of contributing federal political committee. **C**
Name of Employer GIANT GROUP, LTD. Occupation CHAIRMAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726658.1.0315
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. ROZENE R. SUPPLE
Full Name (Last, First, Middle Initial)
Mailing Address 1850 SMOKE TREE LN
City PALM SPRINGS State CA Zip Code 92264-1602
FEC ID number of contributing federal political committee. **C**
Name of Employer R. & R. BROADCASTING Occupation BROADCASTER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA12.726523.1.0315
Amount of Each Receipt this Period 360.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 252 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. CAROL A. TROESH
 Full Name (Last, First, Middle Initial)
 Mailing Address 1370 JET STREAM DRIVE STE. 100
 City Henderson State NV Zip Code 89052-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 13 / 2015**
Transaction ID : SA12.726483.1.0315
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DENNIS A. TROESH
 Full Name (Last, First, Middle Initial)
 Mailing Address 1370 JET STREAM DRIVE STE. 100
 City Henderson State NV Zip Code 89052-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 13 / 2015**
Transaction ID : SA12.726484.1.0315
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. MELISSA WATKINS TRUEBLOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 23812 MALIBU CREST DRIVE
 City Malibu State CA Zip Code 90265-4821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation FREELANCE T.V. PRODUCER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **03 / 18 / 2015**
Transaction ID : SA12.726681.1.0315
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 253 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. STEVEN C. VOORHEES
Full Name (Last, First, Middle Initial)
Mailing Address 345 W. BERWICKE COMN. N.E.
City ATLANTA State GA Zip Code 30342-
FEC ID number of contributing federal political committee. **C**
Name of Employer ROCK FEN. Occupation EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3240.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727401.1.0315
Amount of Each Receipt this Period 3240.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOSEPH C. WALL
Full Name (Last, First, Middle Initial)
Mailing Address 1011 FIRST ST SE
City D.C. State DC Zip Code 20003-3392
FEC ID number of contributing federal political committee. **C**
Name of Employer GOLDMAN SACHS Occupation VICE PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4620.00

Date of Receipt 03 / 24 / 2015
Transaction ID : SA12.726855.1.0315
Amount of Each Receipt this Period 1620.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. EDWARD G. WATKINS
Full Name (Last, First, Middle Initial)
Mailing Address 525 OKEECHOBEE BLVD.
C/O GOODRICH, LLC SUITE 1000
City WEST PALM BEACH State FL Zip Code 33401-6349
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727336.1.0315
Amount of Each Receipt this Period 3120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. MRS. KAREN C. WATKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2618
 City PALM BEACH State FL Zip Code 33480-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : SA12.727335.1.0315
 Amount of Each Receipt this Period: **3120.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. STEVE C. WATSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5406 GROVE STREET
 City CHEVY CHASE State MD Zip Code 20815-7103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **LOEWS CORPORATION** Occupation: **EXECUTIVE**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4600.00**

Date of Receipt: **03 / 16 / 2015**
Transaction ID : SA12.726563.1.0315
 Amount of Each Receipt this Period: **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. STEVE C. WATSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5406 GROVE STREET
 City CHEVY CHASE State MD Zip Code 20815-7103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **LOEWS CORPORATION** Occupation: **EXECUTIVE**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4600.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : SA12.727241.1.0315
 Amount of Each Receipt this Period: **1620.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 255 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. DEBRA WECHSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5299 HAMMOCK DRIVE
 City State Zip Code
 CORAL GABLES FL 33156-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727328.1.0315
 Amount of Each Receipt this Period
 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JEFFREY R. WECHSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5299 HAMMOCK DR
 City State Zip Code
 CORAL GABLES FL 33156-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727327.1.0315
 Amount of Each Receipt this Period
 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ERIC WEIDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 20750 W. VENTURA BLVD. #310
 City State Zip Code
 WOODLAND HILLS CA 91364-6236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WEIDER HEALTH & FITNESS EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : SA12.726692.1.0315
 Amount of Each Receipt this Period
 2000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 256 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT S. WEINER
Full Name (Last, First, Middle Initial)
Mailing Address 2 LEIGHTON CT

City ATLANTA	State GA	Zip Code 30327-4308
FEC ID number of contributing federal political committee. C		
Name of Employer TOTALLY ENTERPRISES	Occupation C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
01 / 23 / 2015
Transaction ID : SA12.723919.1.0315

Amount of Each Receipt this Period
2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT WEINER
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2453

City DALTON	State GA	Zip Code 30722-2453
FEC ID number of contributing federal political committee. C		
Name of Employer TOTALLY CARPET	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4788.00	

Date of Receipt
03 / 31 / 2015
Transaction ID : SA12.727285.1.0315

Amount of Each Receipt this Period
4788.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. ARABEL B. WELHER
Full Name (Last, First, Middle Initial)
Mailing Address 251 SW 87TH TERRACE

City PLANTATION	State FL	Zip Code 33324-2602
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Date of Receipt
03 / 13 / 2015
Transaction ID : SA12.726489.1.0315

Amount of Each Receipt this Period
750.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 257 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. WESLEY C. WELHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 251 SW 87TH TERRACE
 City PLANTATION State FL Zip Code 33324-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BRONCOS Occupation N.F.C.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA12.726492.1.0315
 Amount of Each Receipt this Period 750.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. WESLEY WELLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1415 STANFORD STREET
 City SANTA MONICA State CA Zip Code 90404-3130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726682.1.0315
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. BERNICE WENGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 S.E. FIFTH AVENUE
 City BOCA RATON State FL Zip Code 33432-5519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727406.1.0315
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 258 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. THOMAS D. WESTFALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 S. FLOWER STREET
 City State Zip Code
 LOS ANGELES CA 90071-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WFC SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727276.1.0315
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL L. WHALEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2140 ST. ANDREWS CIRCLE
 City State Zip Code
 BETTENDORF IA 52722-6651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HEART OF AMERICA GROUP HOSPITALITY COMPANY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA12.726487.1.0315
 Amount of Each Receipt this Period
 1560.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. HON. BEVERLY WHITE YEAGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 255 CHERRY LANE
 City State Zip Code
 PALM BEACH FL 33480-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA12.727330.1.0315
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 259 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. EDWARD WHITE
Full Name (Last, First, Middle Initial)
Mailing Address 555 PERUGIA WAY

City LOS ANGELES	State CA	Zip Code 90077-3708
---------------------	-------------	------------------------

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

Name of Employer EDWARD WHITIE & CO., LLP	Occupation SENIOR PARTNER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Transaction ID : SA12.726683.1.0315

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL E. WIELGUS
Full Name (Last, First, Middle Initial)
Mailing Address 3972 CATTAIL POND DRIVE

City JACKSONVILLE	State FL	Zip Code 32224-7941
----------------------	-------------	------------------------

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

Name of Employer IONTUITION	Occupation SENIOR VICE PRESIDENT
--------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA12.726080.1.0315

Amount of Each Receipt this Period

1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. JAMES E. WINCHESTER JR.
Full Name (Last, First, Middle Initial)
Mailing Address 2615 BROOKDALE DRIVE NW

City ATLANTA	State GA	Zip Code 30305-3503
-----------------	-------------	------------------------

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

Name of Employer THE QUIKRETE COS.	Occupation C.E.O.
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727239.1.0315

Amount of Each Receipt this Period

2220.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 260 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. S. CHRISTINE ZANELLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2050 FOREST VIEW AVENUE
 City Hillsborough State CA Zip Code 94010-6119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727407.1.0315
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ROBERT ZARNEGIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 421 N. BEVERLY DRIVE #350
 City Beverly Hills State CA Zip Code 90210-4640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROBITY INTERNATIONAL CORPORATION Occupation CEO/PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 18 / 2015**
Transaction ID : SA12.726698.1.0315
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. BGR GOVERNMENT AFFAIRS, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 14416
 City Washington State DC Zip Code 20044-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1710.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727305.1.0315
 Amount of Each Receipt this Period **810.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 261 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. CISCO SYSTEMS, INC. FEDERAL PAC/CISCO SYSTEMS E-PAC

Full Name (Last, First, Middle Initial)
Mailing Address 400 CAPITOL MALL
SUITE 1545

City SACRAMENTO State CA Zip Code 95814-4434

FEC ID number of contributing federal political committee. **C** C00362707

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 31 / 2015
Transaction ID : SA12.727304.1.0315

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. DIRECTV PAC

Full Name (Last, First, Middle Initial)
Mailing Address 901 F. STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20004-1429

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA12.726562.1.0315

Amount of Each Receipt this Period
1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. HISPANIC 100 FED PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 194

City SAN CLEMENTE State CA Zip Code 92674-0194

FEC ID number of contributing federal political committee. **C** C00524926

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
03 / 18 / 2015
Transaction ID : SA12.726653.1.0315

Amount of Each Receipt this Period
1560.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 262 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. NABPAC
Full Name (Last, First, Middle Initial)
Mailing Address 1771 N. STREET NW
City WASHINGTON State DC Zip Code 20036-2800
FEC ID number of contributing federal political committee. **C** C00009985
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA12.726561.1.0315
Amount of Each Receipt this Period
3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. NABPAC
Full Name (Last, First, Middle Initial)
Mailing Address 1771 N. STREET NW
City WASHINGTON State DC Zip Code 20036-2800
FEC ID number of contributing federal political committee. **C** C00009985
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
03 / 31 / 2015
Transaction ID : SA12.727303.1.0315
Amount of Each Receipt this Period
1500.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. NEW MAJORITY CALIFORNIA FEDERAL PAC
Full Name (Last, First, Middle Initial)
Mailing Address 2350 KERNER BLVD. STE. 250
City SAN RAFAEL State CA Zip Code 94901-5596
FEC ID number of contributing federal political committee. **C** C00387274
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2686.28

Date of Receipt
03 / 18 / 2015
Transaction ID : SA12.726654.1.0315
Amount of Each Receipt this Period
2686.28
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 263 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. PNC PAC
Full Name (Last, First, Middle Initial)
Mailing Address 249 5TH AVENUE
City PITTSBURGH State PA Zip Code 15222-2707
FEC ID number of contributing federal political committee. **C** C00186064
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727367.1.0315
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. SAMSON HOLDINGS LLC
Full Name (Last, First, Middle Initial)
Mailing Address 9200 SUNSET BLVD. STE. 700
City WEST HOLLYWOOD State CA Zip Code 90069-3603
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA12.726652.1.0315
Amount of Each Receipt this Period 1200.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. RUBIO VICTORY COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST STE 115
City ALEXANDRIA State VA Zip Code 22314-5404
FEC ID number of contributing federal political committee. **C** C00494617
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 879276.39

Date of Receipt 06 / 30 / 2015
Transaction ID : 061520150630
Amount of Each Receipt this Period 288177.89
TRANSFER
TRANSFER NET JF PROCEEDS

SUBTOTAL of Receipts This Page (optional)..... ▶ 288177.89
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 264 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. SHELLEY ALLEN
Full Name (Last, First, Middle Initial)

Mailing Address 199 S. LOS ROBIES AVENUE

City PASADENA State CA Zip Code 91101-2452

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt: **03 / 31 / 2015**
Transaction ID : **SA12.752797.1.0615**

Amount of Each Receipt this Period: **-5000.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. CLAYTON ROBERT BARKER III
Full Name (Last, First, Middle Initial)

Mailing Address 4779 SEDBERRY HILL COURT SE

City ATLANTA State GA Zip Code 30339-5362

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

Name of Employer: **SELF-EMPLOYED** Occupation: **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1620.00**

Date of Receipt: **04 / 08 / 2015**
Transaction ID : **SA12.727520.1.0615**

Amount of Each Receipt this Period: **1620.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. HOWARD B. BERNICK
Full Name (Last, First, Middle Initial)

Mailing Address 120 SUNSET AVENUE
APARTMENT 4D

City PALM BEACH State FL Zip Code 33480-3926

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

Name of Employer: **INFORMATION REQUESTED PER BEST EFF** Occupation: **INFORMATION REQUESTED PER BEST EFF**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt: **04 / 28 / 2015**
Transaction ID : **SA12.743399.1.0615**

Amount of Each Receipt this Period: **1600.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 265 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CHARLES K. BOBRINSKOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 707 GLENRIDGE DRIVE
 City GLENVIEW State IL Zip Code 60025-4475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ARIEL INVESTMENTS Occupation ASSET MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2520.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740782.1.0615
 Amount of Each Receipt this Period 2520.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. MARY ANNE BOBRINSKOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 707 GLENRIDGE DRIVE
 City GLENVIEW State IL Zip Code 60025-4475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740779.1.0615
 Amount of Each Receipt this Period 3120.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. ELLYN SETNOR BOGDANOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 908 S. ANDREWS AVENUE
 City FORT LAUDERDALE State FL Zip Code 33316-1036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF()
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740902.1.0615
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 266 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BILL L. BOWLES
Full Name (Last, First, Middle Initial)
Mailing Address 144 SEA ISLAND DRIVE
City GEORGETOWN State SC Zip Code 29440-7261
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 27 / 2015
Transaction ID : SA12.724055.1.0615
Amount of Each Receipt this Period 80.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. NORMAN BRAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1 INDIAN CREEK ISLAND RD
City INDIAN CREEK VILLAGE State FL Zip Code 33154-2903
FEC ID number of contributing federal political committee. **C**
Name of Employer BRAMAN AUTOMOTIVE Occupation OWNER AUTO DEALERSHIPS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727690.1.0615
Amount of Each Receipt this Period 1760.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. PETER DAMON BROWN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2992
City PALM BEACH State FL Zip Code 33480-
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740792.1.0615
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 267 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. GASTON CANTENS
Full Name (Last, First, Middle Initial)
Mailing Address 11750 SW 29TH STREET
City MIAMI State FL Zip Code 33175-2413
FEC ID number of contributing federal political committee. **C**
Name of Employer FLORIDA CRYSTALS CORPORATION Occupation EXECUTIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 3000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740817.1.0615
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. BRITTON S. CHAUVIN
Full Name (Last, First, Middle Initial)
Mailing Address 5717 TCHOUPITOULAS STREET
City NEW ORLEANS State LA Zip Code 70115-2112
FEC ID number of contributing federal political committee. **C**
Name of Employer KARL SENNER LLC Occupation SERVICE MANAGER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA12.755181.1.0615
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ARTHUR B. CHOATE
Full Name (Last, First, Middle Initial)
Mailing Address 1390 S. DIXIE HIGHWAY STE. 2221
City CORAL GABLES State FL Zip Code 33146-2946
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 4800.00

Date of Receipt 03 / 05 / 2014
Transaction ID : SA12.727392.1.0615
Amount of Each Receipt this Period 2500.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 268 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN S. CLEARY
Full Name (Last, First, Middle Initial)
Mailing Address 27 POND ST
City WINCHESTER State MA Zip Code 01890-2313
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 10 / 2015
Transaction ID : SA12.727617.1.0615
Amount of Each Receipt this Period
300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. MONETHA COBB
Full Name (Last, First, Middle Initial)
Mailing Address 1119 ROXBORO PTE.
City ATLANTA State GA Zip Code 30324-2933
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
FRANKLIN STREET COMMERCIAL REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2015
Transaction ID : SA12.750864.1.0615
Amount of Each Receipt this Period
300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. LEONARD M. COLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 1645 CROSS POINTE WAY
City TALLAHASSEE State FL Zip Code 32308-4767
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2015
Transaction ID : SA12.740890.1.0615
Amount of Each Receipt this Period
3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 269 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CESAR V. CONDA
Full Name (Last, First, Middle Initial)
Mailing Address 901 7TH STREET NW STE. 200

City WASHINGTON	State DC	Zip Code 20001-3883
--------------------	-------------	------------------------

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

Name of Employer NAVIGATORS GLOBAL	Occupation FOUNDING PRINCIPAL & POLICY ADVISOR
---------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2015

Transaction ID : SA12.759505.1.0615

Amount of Each Receipt this Period

300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. MICHAEL C. CORCORAN
Full Name (Last, First, Middle Initial)
Mailing Address 7746 STILL LAKES DRIVE

City ODESSA	State FL	Zip Code 33556-2260
----------------	-------------	------------------------

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

Name of Employer CORCORAN & ASSOCIATES	Occupation POLITICAL CONSULTANT
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA12.727079.1.0615

Amount of Each Receipt this Period

1600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. CHRIST P. CORDON
Full Name (Last, First, Middle Initial)
Mailing Address 416 W. 23RD STREET

City PANAMA CITY	State FL	Zip Code 32405-4508
---------------------	-------------	------------------------

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

Name of Employer CAHALL'S DELI	Occupation SELF-EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740842.1.0615

Amount of Each Receipt this Period

600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 270 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. BRYAN A. CORR SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address BOX 611310
 City ROSEMARY BEACH State FL Zip Code 32461-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORR GROUP LLC Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740816.1.0615
 Amount of Each Receipt this Period 4500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. TINA N. CORR
 Full Name (Last, First, Middle Initial)
 Mailing Address BOX 611310
 City ROSEMARY BEACH State FL Zip Code 32461-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORR GROUP LLC Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740809.1.0615
 Amount of Each Receipt this Period 4800.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. CHRIS C. CRAMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 BUNKERS COVE ROAD
 City PANAMA CITY State FL Zip Code 32401-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BILL CRAMER GM Occupation AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740807.1.0615
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 271 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RANDALL R. CRISORIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 TURTLE CREEK CIRCLE
 City State Zip Code
 OLDSMAR FL 34677-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNITED DEVELOPMENT SYSTEMS, INC. CORPORATE EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740843.1.0615
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DAVID A. DEETER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3288 IVANHOE DRIVE NW
 City State Zip Code
 ATLANTA GA 30327-1528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740896.1.0615
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. STEVEN DELBIANCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1920 VIRGINIA AVENUE
 City State Zip Code
 MCLEAN VA 22101-4936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NETCHOICE GOVERNMENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2015
Transaction ID : SA12.727420.1.0615
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 272 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JACK C. DEMETREE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 47050
 City JACKSONVILLE State FL Zip Code 32247-7050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEMETREE BROTHERS Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4560.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA12.724242.1.0615
 Amount of Each Receipt this Period -4800.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. THE HONORA WILLIAM J. DIAMOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 WELLS ROAD
 City PALM BEACH State FL Zip Code 33480-3625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 160 E.89TH ST. REALTY CORP. Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3660.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740818.1.0615
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. THE HONORA WILLIAM J. DIAMOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 WELLS ROAD
 City PALM BEACH State FL Zip Code 33480-3625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 160 E.89TH ST. REALTY CORP. Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3660.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA12.742296.1.0615
 Amount of Each Receipt this Period 60.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 273 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT DIENER
Full Name (Last, First, Middle Initial)

Mailing Address 8 INDIAN CREEK ISLAND ROAD

City INDIAN CREEK VILLAGE	State FL	Zip Code 33154-2903
------------------------------	-------------	------------------------

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

Name of Employer CONSUMER CLUB INC.	Occupation EXECUTIVE
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA12.697457.1.0615

Amount of Each Receipt this Period

2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. SWANEE DIMARE
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 900460

City HOMESTEAD	State FL	Zip Code 33090-0460
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2014

Transaction ID : SA12.727796.1.0615

Amount of Each Receipt this Period

1380.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. MARK B. DODSON
Full Name (Last, First, Middle Initial)

Mailing Address 2293 FAIRHAVEN CIR. NE

City ATLANTA	State GA	Zip Code 30305-4316
-----------------	-------------	------------------------

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

Name of Employer MORTGAGE CAPITAL ADVISORS	Occupation PRIVATE MORTGAGE BANKING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : SA12.727512.1.0615

Amount of Each Receipt this Period

1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 274 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. DAVID E. DREIBELBIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4743 RIDGEGATE CIRCLE
 City State Zip Code
 DULUTH GA 30097-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740815.1.0615
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. PATRICIA L. DREIBELBIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4743 RIDGEGATE CIRCLE
 City State Zip Code
 DULUTH GA 30097-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740799.1.0615
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. EMILY DRYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 HAMMON AVENUE
 City State Zip Code
 PALM BEACH FL 33480-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BOB WESTONHALL ASSISTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740841.1.0615
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 275 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MARK ESCUDE II
Full Name (Last, First, Middle Initial)

Mailing Address 105 PUTNEY BRIDGE LANE

City SIMPSONVILLE State SC Zip Code 29681-3658

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

Name of Employer MCE AUTOMOTIVE Occupation PLATFORM DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740781.1.0615

Amount of Each Receipt this Period 1880.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOSE F. FANJUL JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1 N. CLEMATIS STREET, STE. 200

City WEST PALM BEACH State FL Zip Code 33401-5551

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

Name of Employer FLORIDA CRYSTALS CORPORATION Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740838.1.0615

Amount of Each Receipt this Period 3120.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. LOURDES M. FANJUL
Full Name (Last, First, Middle Initial)

Mailing Address 1 N. CLEMATIS STREET STE. 200

City WEST PALM BEACH State FL Zip Code 33401-5551

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740821.1.0615

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 276 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MR. GLEN STEVEN FEINGOLD		Date of Receipt MM / DD / YYYY 04 / 17 / 2015
Mailing Address 200 W. CYPRESS CREEK ROAD SUITE 500		Transaction ID : SA12.773133.1.0615
City FORT LAUDERDALE	State FL	Zip Code 33309-2338
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer MCNA DENTAL PLANS	Occupation C.O.O.	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) B. DR. JEFFREY P. FEINGOLD		Date of Receipt MM / DD / YYYY 04 / 17 / 2015
Mailing Address 200 W. CYPRESS CREEK ROAD		Transaction ID : SA12.740804.1.0615
City FORT LAUDERDALE	State FL	Zip Code 33309-2174
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer MCNA DENTAL	Occupation PRESIDENT/CEO	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial) C. MR. NICHOLAS T. FERRERI		Date of Receipt MM / DD / YYYY 04 / 17 / 2015
Mailing Address 7840 ESTERO BLVD.		Transaction ID : SA12.740806.1.0615
City FORT MYERS BEACH	State FL	Zip Code 33931-5012
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3000.00	
Name of Employer SELF-EMPLOYED	Occupation CONSULTANT/HEALTH CARE	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 277 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. LOULETTE M. FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2211 HARRISON AVENUE
 City PANAMA CITY State FL Zip Code 32405-4549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation OFFICE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740810.1.0615
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. DR. WILLIAM J. FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2211 HARRISON AVENUE
 City PANAMA CITY State FL Zip Code 32405-4549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740814.1.0615
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. THE HON. GAY HART GAINES
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 N. BREAKERS ROW APARTMENT N35
 City PALM BEACH State FL Zip Code 33480-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727271.1.0615
 Amount of Each Receipt this Period **1760.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 278 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. STANLEY N. GAINES
Full Name (Last, First, Middle Initial)
Mailing Address 2 N. BREAKERS ROW APT. N35
City PALM BEACH State FL Zip Code 33480-3986
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727267.1.0615
Amount of Each Receipt this Period 1760.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. JOHN RICHARD GIBSON
Full Name (Last, First, Middle Initial)
Mailing Address 7409 DOE AVENUE
City LAS VEGAS State NV Zip Code 89117-1445
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 04 / 16 / 2015
Transaction ID : SA12.739842.1.0615
Amount of Each Receipt this Period 3120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. MARIANNE M. GIBSON
Full Name (Last, First, Middle Initial)
Mailing Address 7409 DOE AVENUE
City LAS VEGAS State NV Zip Code 89117-1445
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3120.00

Date of Receipt 04 / 16 / 2015
Transaction ID : SA12.739841.1.0615
Amount of Each Receipt this Period 3120.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 279 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MARC S. GOLDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 8020
 City GARDEN CITY State NY Zip Code 11530-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3100.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727277.1.0615
 Amount of Each Receipt this Period 400.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. FAUSTO B. GOMEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 765 CRANDON BLVD. #402
 City KEY BISCAWAYNE State FL Zip Code 33149-2568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOMEZ BARKER ASSOCIATES Occupation GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740820.1.0615
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. IAN H. GRAHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 BAHAMA LANE
 City PALM BEACH State FL Zip Code 33480-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740786.1.0615
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 280 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. KENNETH E. GRANGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3768 LONGFELLOW ROAD
 City TALLAHASSEE State FL Zip Code 32311-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CAPITAL CITY CONSULTING Occupation GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740830.1.0615
 Amount of Each Receipt this Period 1500.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. NADENE HAINES
 Full Name (Last, First, Middle Initial)
 Mailing Address 241 N. ROCKINGHAM AVENUE
 City LOS ANGELES State CA Zip Code 90049-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740847.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. CHARLES R. HARLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3200 LEMONS RIDGE DRIVE
 City ATLANTA State GA Zip Code 30339-4305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTHWESTERN MUTUAL Occupation WEALTH MANAGEMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740827.1.0615
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 281 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ADAM HASNER
Full Name (Last, First, Middle Initial)

Mailing Address 17100-5 BOCA CLUB BLVD.

City BOCA RATON	State FL	Zip Code 33487-1256
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FEC ID number of contributing federal political committee. **C**

Name of Employer PEOPLE'S TRUST INSURANCE	Occupation CHIEF MARKETING OFFICER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740823.1.0615

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. KAREN S. HEITHOFF
Full Name (Last, First, Middle Initial)

Mailing Address 4911 FISHER ISLAND DRIVE

City MIAMI BEACH	State FL	Zip Code 33109-0183
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation RETAIL
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA12.739363.1.0615

Amount of Each Receipt this Period

4700.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. DR. KEN B. HEITHOFF M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 4911 FISHER ISLAND DRIVE

City MIAMI BEACH	State FL	Zip Code 33109-0183
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA12.769604.1.0615

Amount of Each Receipt this Period

2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 282 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. BETH HELLER		Date of Receipt MM / DD / YYYY 03 / 18 / 2015 Transaction ID : SA12.761073.1.0615
Mailing Address PO BOX 320825		Amount of Each Receipt this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22320-4825
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer HOMEMAKER	Occupation HOMEMAKER	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. MR. REYNOLDS HENDERSON		Date of Receipt MM / DD / YYYY 04 / 17 / 2015 Transaction ID : SA12.740837.1.0615
Mailing Address P.O. BOX 2548		Amount of Each Receipt this Period 4500.00
City SANTA ROSA BEACH	State FL	Zip Code 32459-2548
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer SRB SERVICING LLC	Occupation MEMBER/MANAGER	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. MR. OSCAR R. HERNANDEZ		Date of Receipt MM / DD / YYYY 04 / 21 / 2015 Transaction ID : SA12.742092.1.0615
Mailing Address 1 N. CLEMATIS STREET SUITE 200		Amount of Each Receipt this Period 3000.00
City WEST PALM BEACH	State FL	Zip Code 33401-5551
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer FLORIDA CRYSTALS CORPORATION	Occupation VICE PRESIDENT/CHIEF FINANCIAL OFFICE	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 283 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. PHILLIP R. HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1177

City GREENVILLE State SC Zip Code 29602-1177

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

Name of Employer HUGHES INVESTMENTS Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 12 / 2015
Transaction ID : SA12.727739.1.0615

Amount of Each Receipt this Period 2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. NICHOLAS V. IAROSI
Full Name (Last, First, Middle Initial)
Mailing Address 4556 GROVE PARK DRIVE

City TALLAHASSEE State FL Zip Code 32311-3737

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

Name of Employer CAPITA CITY CONSULTING Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA12.741951.1.0615

Amount of Each Receipt this Period 4800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. CATHERINE JOHNSON
Full Name (Last, First, Middle Initial)
Mailing Address 1411 EDGEWOOD DRIVE

City PALO ALTO State CA Zip Code 94301-3118

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3060.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.760819.1.0615

Amount of Each Receipt this Period 3060.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 284 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. FRANKLIN P. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1411 EDGEWOOD DRIVE
 City PALO ALTO State CA Zip Code 94301-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSET MANAGEMENT COMPANY Occupation SOLE PROPRIETOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 03 / 2014
Transaction ID : SA12.760818.1.0615
 Amount of Each Receipt this Period -2000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. GERALD R. JORDAN JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 S LAKE TRL
 City PALM BEACH State FL Zip Code 33480-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HELLMAN JORDAN MANAGEMENT CO. Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4900.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.760315.1.0615
 Amount of Each Receipt this Period 4900.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. CAL KENDRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3964 E PARADISE VIEW DR
 City PARADISE VALLEY State AZ Zip Code 85253-3800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 14 / 2015
Transaction ID : SA12.737427.1.0615
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 285 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CAL KENDRICK
Full Name (Last, First, Middle Initial)

Mailing Address 3964 E PARADISE VIEW DR

City PARADISE VALLEY	State AZ	Zip Code 85253-3800
-------------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : SA12.738662.1.0615

Amount of Each Receipt this Period
2000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. CATHERINE G. KENDRICK
Full Name (Last, First, Middle Initial)

Mailing Address 3964 E. PARADISE VIEW DRIVE

City PARADISE VALLEY	State AZ	Zip Code 85253-3800
-------------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740813.1.0615

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. JORIE BUTLER KENT
Full Name (Last, First, Middle Initial)

Mailing Address 349 CHILEAN AVENUE

City PALM BEACH	State FL	Zip Code 33480-4631
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FEC ID number of contributing federal political committee. **C**

Name of Employer ABERCROMBIE & KENT	Occupation VICE CHAIRMAN
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727265.1.0615

Amount of Each Receipt this Period
1800.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 286 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MR. CODY KHAN

Mailing Address 243 EAGLE DRIVE

City PANAMA CITY BEACH State FL Zip Code 32407-2821

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

Name of Employer HILTON INN RESORT Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA12.760310.1.0615

Amount of Each Receipt this Period
 3100.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. MRS. AMY S. KISTULINEC

Mailing Address 3773 HADDON HALL ROAD

City ATLANTA State GA Zip Code 30327-2658

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation NON PROFIT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2015
Transaction ID : SA12.727522.1.0615

Amount of Each Receipt this Period
 1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. MR. MARK W. KISTULINEC

Mailing Address 3773 HADDON HALL ROAD

City ATLANTA State GA Zip Code 30327-2658

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

Name of Employer B.C.G. Occupation MANAGEMENT CONSULTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2015
Transaction ID : SA12.727523.1.0615

Amount of Each Receipt this Period
 1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 287 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. CARLOS A. LACASA
Full Name (Last, First, Middle Initial)

Mailing Address 5690 SW 84 TERRACE

City MIAMI State FL Zip Code 33143-8328

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

Name of Employer MCNA HEALTHCARE HOLDINGS, LLC Occupation SENIOR V.P. & GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740780.1.0615

Amount of Each Receipt this Period 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. RON LAFACE
Full Name (Last, First, Middle Initial)

Mailing Address 1728 TARPON DRIVE

City TALLAHASSEE State FL Zip Code 32308-4731

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

Name of Employer CAPITAL CITY CONSULTING Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA12.727405.1.0615

Amount of Each Receipt this Period 1500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. THOMAS A. LEE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2743

City BRANDON State FL Zip Code 33509-2743

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

Name of Employer SABAL HOMES OF FLORIDA, INC. Occupation DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA12.743398.1.0615

Amount of Each Receipt this Period 600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 288 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RYAN J. LEVENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2396 DELLWOOD DRIVE
 City ATLANTA State GA Zip Code 30305-4077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRIVET FUND MANAGEMENT LLC Occupation INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740829.1.0615
 Amount of Each Receipt this Period 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JOE MICHAEL LITTLETON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1726
 City PANAMA CITY State FL Zip Code 32402-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740895.1.0615
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. SUZI B. LUSTGARTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 HILLBROOK RD
 City BRYN MAWR State PA Zip Code 19010-3634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SUZI BRAMAN INTERIORS Occupation INTERIOR DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.760293.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 289 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. PATRICIA A. LYSIK
Full Name (Last, First, Middle Initial)
Mailing Address 434 CHURCH HILL RD
City TRUMBULL State CT Zip Code 06611-3839
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA12.727728.1.0615
Amount of Each Receipt this Period -21.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. DAVID S. MACK
Full Name (Last, First, Middle Initial)
Mailing Address 2115 LINWOOD AVE
City FORT LEE State NJ Zip Code 07024-5020
FEC ID number of contributing federal political committee. **C**
Name of Employer MACK MANAGEMENT & CONSTRUCTION Occupation CEO
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740789.1.0615
Amount of Each Receipt this Period 600.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. ELLAUISE L. MADDOX
Full Name (Last, First, Middle Initial)
Mailing Address 4731 BONITA BAY BLVD., UNIT 2104
City BONITA SPRINGS State FL Zip Code 34134-6716
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA12.742288.1.0615
Amount of Each Receipt this Period 300.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 290 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. MICHAEL R. MAGUIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2893 CASTLEWOOD DRIVE
 City ATLANTA State GA Zip Code 30327-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SUN TRUST BANKS, INC. Occupation INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740828.1.0615
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. WILLIAM M. MATTHEWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 380 N. LAKE WAY
 City PALM BEACH State FL Zip Code 33480-3630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740819.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. ANDREW G. MCBRIDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 K. STREET NW
 City WASHINGTON State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILEY REIN, LLP Occupation ATTORNEY AT LAW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 05 / 2014
Transaction ID : SA12.689775.1.0615
 Amount of Each Receipt this Period 2000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 291 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MR. ANDREW G. MCBRIDE		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : SA12.725315.1.0615
Mailing Address 1776 K. STREET NW		Amount of Each Receipt this Period 2000.00
City WASHINGTON	State DC	Zip Code 20006-2304
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer WILEY REIN, LLP	Occupation ATTORNEY AT LAW	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. MS. HAMMOND MALLOY MCDANIEL		Date of Receipt MM / DD / YYYY 06 / 03 / 2015 Transaction ID : SA12.759506.1.0615
Mailing Address 2407 CAMERON MILLS ROAD		Amount of Each Receipt this Period 300.00
City ALEXANDRIA	State VA	Zip Code 22302-3302
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. MR. JON D. MCKEE		Date of Receipt MM / DD / YYYY 04 / 17 / 2015 Transaction ID : SA12.740800.1.0615
Mailing Address 1540 E. BANK DRIVE		Amount of Each Receipt this Period 600.00
City MARIETTA	State GA	Zip Code 30068-1806
FEC ID number of contributing federal political committee. C		TRANSFER
Name of Employer FRAZIER & DEETER	Occupation PARTNER	[MEMO ITEM] TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 292 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. KEN MEARES
Full Name (Last, First, Middle Initial)

Mailing Address 4150 SW 28 WAY

City State Zip Code
FORT LAUDERDALE FL 33312-5201

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

Name of Employer Occupation
GREAT HEALTH WORKS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2015
Transaction ID : SA12.727329.1.0615

Amount of Each Receipt this Period
1760.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. LINDA MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 225 S. LAKE AVENUE

City State Zip Code
PASADENA CA 91101-3005

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

Name of Employer Occupation
ONE GLOBAL MEDIATION ATTORNEY/MEDIATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2015
Transaction ID : SA12.740801.1.0615

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. RICK MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1201 W. PEACHTREE STREET 14TH FL.

City State Zip Code
ATLANTA GA 30309-3449

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

Name of Employer Occupation
BRYAN CAVE LLP ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2015
Transaction ID : SA12.740811.1.0615

Amount of Each Receipt this Period
150.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 293 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICK MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1201 W. PEACHTREE STREET 14TH FL.

City ATLANTA	State GA	Zip Code 30309-3449
-----------------	-------------	------------------------

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

Name of Employer BRYAN CAVE LLP	Occupation ATTORNEY
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740812.1.0615

Amount of Each Receipt this Period

150.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. LAWRENCE A. MOENS
Full Name (Last, First, Middle Initial)

Mailing Address 1480 NORTH LAKE WAY

City PALM BEACH	State FL	Zip Code 33480-3031
--------------------	-------------	------------------------

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

Name of Employer LAWRENCE A. MOENS ASSOCIATES	Occupation REAL ESTATE BROKER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA12.727323.1.0615

Amount of Each Receipt this Period

100.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. CHRISTOPHER R. MOYA
Full Name (Last, First, Middle Initial)

Mailing Address 1400 VILLAGE SQUARE BLVD., SUITE 3

City TALLAHASSEE	State FL	Zip Code 32312-1250
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740900.1.0615

Amount of Each Receipt this Period

3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MR. VERNON J. NAGEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3765 PACES RIDGE NW
 City ATLANTA State GA Zip Code 30327-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740894.1.0615
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. ALBERT NAHMED
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 TAIHITI ISLAND GROVE
 City CORAL GABLES State FL Zip Code 33143-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.760307.1.0615
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. JANE NAHMED
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 TAIHITI ISLAND GROVE
 City CORAL GABLES State FL Zip Code 33143-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.760306.1.0615
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 295 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. CLAUDIA NAVARRO
Full Name (Last, First, Middle Initial)
Mailing Address 7000 SW 97TH AVENUE #201

City MIAMI	State FL	Zip Code 33173-1492
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4697.27	

Date of Receipt
04 / 02 / 2015
Transaction ID : SA12.756902.1.0615

Amount of Each Receipt this Period
4337.27

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MS. SUZANNE L. NIEDLAND
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1748

City JUPITER	State FL	Zip Code 33468-1748
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation PRODUCER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
03 / 31 / 2015
Transaction ID : SA12.727325.1.0615

Amount of Each Receipt this Period
1760.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. SRINIVASA NIMMAGADDA
Full Name (Last, First, Middle Initial)
Mailing Address 4365 HASTINGS DRIVE

City CUMMING	State GA	Zip Code 30041-5853
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1620.00	

Date of Receipt
04 / 17 / 2015
Transaction ID : SA12.740897.1.0615

Amount of Each Receipt this Period
1620.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 296 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. YASMIN E. OCHSHORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 CHAMPIONSHIP COURT
 City LAS VEGAS State NV Zip Code 89134-0513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VENETIAN HOTEL & RESORT Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.769595.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. MANDELL J. OURISMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 REGENTS PARK ROAD
 City PALM BEACH State FL Zip Code 33480-5014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OURISMAN AUTOMOTIVE ENTERPRISES Occupation AUTOMOTIVE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727283.1.0615
 Amount of Each Receipt this Period 1800.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. DOROTHY A. PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 5TH STREET
 City WEST PALM BEACH State FL Zip Code 33401-4030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727331.1.0615
 Amount of Each Receipt this Period 1760.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 297 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. MAUREEN T. PETERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 24686 W. MIDDLE FORK ROAD
 City BARRINGTON State IL Zip Code 60010-2441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CEANNATE CORP. Occupation PRESIDENT & COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **05 / 20 / 2015**
Transaction ID : SA12.755189.1.0615
 Amount of Each Receipt this Period **600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. THOMAS PETERFFY
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 CONYERS FARM DRIVE
 City GREENWICH State CT Zip Code 06831-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4600.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740787.1.0615
 Amount of Each Receipt this Period **4600.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JAMES M. PRICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 W. KINGSTON ROAD
 City ROSEMARY BEACH State FL Zip Code 32461-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GRAYTON BEER COMPANY LLC Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740833.1.0615
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 298 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN G. RANGOS SR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 OSPREY POINT CIRCLE
 City BOCA RATON State FL Zip Code 33431-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4800.00**

Date of Receipt **03 / 31 / 2015**
Transaction ID : SA12.727324.1.0615
 Amount of Each Receipt this Period **1800.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DONALD B. READ
 Full Name (Last, First, Middle Initial)
 Mailing Address 16069 NW LAKESIDE LANE
 City BRISTOL State FL Zip Code 32321-3933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740899.1.0615
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. DR. GLENN C. RICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 AQUA VISTA BLVD.
 City FORT LAUDERDALE State FL Zip Code 33301-1553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **908.00**

Date of Receipt **01 / 27 / 2015**
Transaction ID : SA12.724061.1.0615
 Amount of Each Receipt this Period **8.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 299 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JAMES A. ROBERTSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5954 NW 74TH TERRACE
 City PARKLAND State FL Zip Code 33067-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALLEGENTS Occupation PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.769596.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. STEPHEN G. ROMIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 HOLLYWOOD DRIVE
 City METAIRIE State LA Zip Code 70005-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAPORTE CPA'S AND BUSINESS Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 20 / 2015**
Transaction ID : SA12.755182.1.0615
 Amount of Each Receipt this Period 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JASON ROSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5630 EAST NAUNI VALLEY DRIVE
 City PARADISE VALLEY State AZ Zip Code 85253-5125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROSE LAW GROUP Occupation FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 12 / 2015**
Transaction ID : SA12.727737.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 300 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. SCOTT L. ROSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3580 MOSSY CREEK LANE
 City TALLAHASSEE State FL Zip Code 32311-3641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FLORIDIAN PARTNERS, L.L.C. Occupation GOVERNMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740892.1.0615
 Amount of Each Receipt this Period **1500.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. DANIEL SALAMA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3102 NW 82 WAY
 City COOPER CITY State FL Zip Code 33024-3257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCNA DENTAL Occupation MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.769597.1.0615
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. CORRINE SANDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 ST. PIERRE ROAD
 City LOS ANGELES State CA Zip Code 90077-3432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3000.00**

Date of Receipt **04 / 13 / 2015**
Transaction ID : SA12.727786.1.0615
 Amount of Each Receipt this Period **3000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 301 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. LENNY SANDS
Full Name (Last, First, Middle Initial)
Mailing Address 321 ST. PIERRE ROAD
City LOS ANGELES State CA Zip Code 90077-3432
FEC ID number of contributing federal political committee. **C**
Name of Employer CAPITAL BRANDS Occupation DIRECT MARKETING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 13 / 2015
Transaction ID : SA12.727788.1.0615
Amount of Each Receipt this Period 3000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. MARTHA M. SCHAR
Full Name (Last, First, Middle Initial)
Mailing Address 550 S OCEAN BLVD
City PALM BEACH State FL Zip Code 33480-4737
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 01 / 2014
Transaction ID : SA12.684256.1.0615
Amount of Each Receipt this Period 2000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MRS. MARTHA M. SCHAR
Full Name (Last, First, Middle Initial)
Mailing Address 550 S OCEAN BLVD
City PALM BEACH State FL Zip Code 33480-4737
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.760290.1.0615
Amount of Each Receipt this Period 5000.00
TRANSFER
[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 302 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. JOHN F. SCHRAUDENBACH
Full Name (Last, First, Middle Initial)

Mailing Address 2545 SUGARLOST CLUB DRIVE

City State Zip Code
DULUTH GA 30097-7406

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

Name of Employer Occupation
ERNST & YOUNG CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2015

Transaction ID : SA12.727784.1.0615

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. CHARLES A. SCHUMACHER SR.
Full Name (Last, First, Middle Initial)

Mailing Address 105 CLARENDON AVENUE

City State Zip Code
PALM BEACH FL 33480-4905

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

Name of Employer Occupation
SCHUMAKER AUTO GROUP PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA12.740790.1.0615

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. HANK COLLUM SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 109 HUNT CLUB ROAD

City State Zip Code
BARNWELL SC 29812-8207

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

Name of Employer Occupation
COLLUM'S LUMBER PRODUCTS, LLC CEO/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : SA12.740791.1.0615

Amount of Each Receipt this Period
3240.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 303 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. VIKKI B. SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 109 HUNT CLUB ROAD

City BARNWELL State SC Zip Code 29812-8207

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA12.769600.1.0615

Amount of Each Receipt this Period
 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. GRETCHEN SEAY
Full Name (Last, First, Middle Initial)

Mailing Address 325 N. SAINT PAUL STREET SUITE 3500

City DALLAS State TX Zip Code 75201-3869

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

Name of Employer CLEAR SIGHT ADVISORS Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2015

Transaction ID : SA12.769364.1.0615

Amount of Each Receipt this Period
 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. KARL A. SENNER
Full Name (Last, First, Middle Initial)

Mailing Address 25 WEST THIRD STREET

City KENNER State LA Zip Code 70062-7007

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

Name of Employer KARL SENNER, LLC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015

Transaction ID : SA12.755191.1.0615

Amount of Each Receipt this Period
 300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 304 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MS. KAREN L. SEPKO
 Full Name (Last, First, Middle Initial)
 Mailing Address 920 POEYFARRE STREET UNIT 201
 City NEW ORLEANS State LA Zip Code 70130-3899
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RED BEAN REALTY Occupation OWNER/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740846.1.0615
 Amount of Each Receipt this Period
 300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MS. FRANCES SHEFFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2378 TUSCAVILLA RD
 City TALLAHASSEE State FL Zip Code 32312-5029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740903.1.0615
 Amount of Each Receipt this Period
 1620.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. KYLE D. SHOOT
 Full Name (Last, First, Middle Initial)
 Mailing Address 510 SKYVIEW DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SYSTEM SERVICE & ENGINEERING, INC. Occupation CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740831.1.0615
 Amount of Each Receipt this Period
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 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 305 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. ANNETTE C. SIMMONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5915 DELOACHE AVENUE
 City DALLAS State TX Zip Code 75225-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740795.1.0615
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. PATRICIA E. SIMMONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3957 PARADISE VIEW DRIVE
 City PARADISE VALLEY State AZ Zip Code 85253-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA12.773285.1.0615
 Amount of Each Receipt this Period
 -300.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. JAMES H. SLONINA
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 E. 2ND STREET
 City LYNN HAVEN State FL Zip Code 32444-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PANHANDLE ENGINEERING, INC. PRESIDENT/ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740832.1.0615
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 306 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MRS. DIANE G. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 BUTTS ROAD
 SUITE 320
 City BOCA RATON State FL Zip Code 33431-7453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740788.1.0615
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. THOMAS W. SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 BUTTS ROAD STE. 320
 City BOCA RATON State FL Zip Code 33431-7453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRESCOTT INVESTORS, INC Occupation FOUNDRING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740783.1.0615
 Amount of Each Receipt this Period **5000.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MRS. KRIS M. SPAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2926 RIVERMEADE DRIVE NW
 City ATLANTA State GA Zip Code 30327-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **04 / 17 / 2015**
Transaction ID : SA12.740898.1.0615
 Amount of Each Receipt this Period **300.00**
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 307 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. RICHARD A. SPERBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6835 WILDLIFE ROAD
 City MALIBU State CA Zip Code 90265-4306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC UNEMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740835.1.0615
 Amount of Each Receipt this Period
 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MS. JOY SPRAGENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7426 FISHER ISLAND DRIVE
 City MIAMI BEACH State FL Zip Code 33109-0765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740845.1.0615
 Amount of Each Receipt this Period
 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. RICHARD E. STEED
 Full Name (Last, First, Middle Initial)
 Mailing Address 1525 MISTY OAKS DRIVE
 City ATLANTA State GA Zip Code 30350-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740826.1.0615
 Amount of Each Receipt this Period
 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 308 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. EDWARD ALAN STRONGIN
Full Name (Last, First, Middle Initial)

Mailing Address 2772 NW 84TH TERRACE

City COOPER CITY State FL Zip Code 33024-5293

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

Name of Employer MCNA DENTAL Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740802.1.0615

Amount of Each Receipt this Period
 5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MR. BARRON STROTHER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1380

City SANTA ROSA BEACH State FL Zip Code 32459-1380

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

Name of Employer CONTINENTAL PACIFIC LLC Occupation MEMBER/MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740834.1.0615

Amount of Each Receipt this Period
 4500.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MS. ELIZABETH PIPES SWANSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 148
1050 OAKVILLE CROSS ROAD

City OAKVILLE State CA Zip Code 94562-0148

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3456.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA12.727780.1.0615

Amount of Each Receipt this Period
 3456.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 309 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ARMANDO A. TABERNILLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 213 E. LAKEWOOD ROAD
 City WEST PALM BEACH State FL Zip Code 33405-3315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FLORIDA CRYSTALS CORPORATION Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 21 / 2015
Transaction ID : SA12.742093.1.0615
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MR. JOHN S. TRENT
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2514
 City PALM BEACH State FL Zip Code 33480-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE/PRIVATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740778.1.0615
 Amount of Each Receipt this Period 600.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. WENDY TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 243 EAGLE DR.
 City PANAMA CITY BEACH State FL Zip Code 32407-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 13 / 2015
Transaction ID : SA12.760309.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 310 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. EDWARD G. WATKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 OKEECHOBEE BLVD.
 C/O GOODRICH, LLC SUITE 1000
 City WEST PALM BEACH State FL Zip Code 33401-6349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727336.1.0615
 Amount of Each Receipt this Period 1880.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. KAREN C. WATKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2618
 City PALM BEACH State FL Zip Code 33480-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727335.1.0615
 Amount of Each Receipt this Period 1880.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MS. DEBRA WECHSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5299 HAMMOCK DRIVE
 City CORAL GABLES State FL Zip Code 33156-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA12.727328.1.0615
 Amount of Each Receipt this Period 1880.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 490
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)
Reclaim America PAC

A. MRS. NICOLE WEIDER
Full Name (Last, First, Middle Initial)

Mailing Address 7 BEVERLY RIDGE TERRACE

City BEVERLY HILLS State CA Zip Code 90210-1343

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt: **04 / 21 / 2015**
Transaction ID : SA12.773127.1.0615

Amount of Each Receipt this Period: **5000.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

B. MRS. DEBORA J. WEINSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 12173 PLANTATION WAY

City PALM BEACH GARDENS State FL Zip Code 33418-1570

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt: **04 / 17 / 2015**
Transaction ID : SA12.740785.1.0615

Amount of Each Receipt this Period: **2300.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

C. MR. ED WENGER
Full Name (Last, First, Middle Initial)

Mailing Address 450 SE 5TH AVENUE

City BOCA RATON State FL Zip Code 33432-5519

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

Name of Employer: **INFORMATION REQUESTED PER BEST EFF** Occupation: **INFORMATION REQUESTED PER BEST EFF**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3240.00**

Date of Receipt: **04 / 17 / 2015**
Transaction ID : SA12.740836.1.0615

Amount of Each Receipt this Period: **3240.00**

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 312 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

A. MR. ROBERT C. WETENHALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 PARK AVENUE
 City NEW YORK State NY Zip Code 10022-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation PRIVATE INVESTOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 3000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.740824.1.0615
 Amount of Each Receipt this Period 3000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

B. MRS. ANDREA WYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3131 LAS VEGAS BLVD. S.
 City LAS VEGAS State NV Zip Code 89109-1967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.769601.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

C. MR. STEVE A. WYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3131 LAS VEGAS BLVD. S.
 City LAS VEGAS State NV Zip Code 89109-1967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WYNN RESORTS Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA12.769602.1.0615
 Amount of Each Receipt this Period 5000.00
 TRANSFER
[MEMO ITEM]
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 313 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. BARNEY BISHOP CONSULTING LLC

Mailing Address 204 SOUTH MONROE STREET, SUITE 201

City TALLAHASSEE	State FL	Zip Code 32301-1800
---------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740888.1.0615

Amount of Each Receipt this Period
600.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. H. IRWIN LEVY, LLC

Mailing Address 1601 FORUM PLACE, SUITE 500

City WEST PALM BEACH	State FL	Zip Code 33401-8103
-------------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : SA12.740887.1.0615

Amount of Each Receipt this Period
3000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. JM FAMILY ENTERPRISES, INC. PAC

Mailing Address 111 JIM MORAN BLVD.

City DEERFIELD BEACH	State FL	Zip Code 33442-1701
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C C00240911**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA12.743396.1.0615

Amount of Each Receipt this Period
900.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 314 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. STRATEGY PAC

Mailing Address 3048 SHOREWOOD DRIVE

City OSHKOSH State WI Zip Code 54901-1648

FEC ID number of contributing federal political committee. **C** C00497842

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2015
Transaction ID : SA12.740886.1.0615

Amount of Each Receipt this Period
5000.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
B. UNITED HEALTH SERVICES PAC INC.

Mailing Address P.O. BOX 1210

City TOCCOA State GA Zip Code 30577-1421

FEC ID number of contributing federal political committee. **C** C00400135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2015
Transaction ID : SA12.742091.1.0615

Amount of Each Receipt this Period
300.00

TRANSFER

[MEMO ITEM]
TRANSFER FROM RUBIO VICTORY

Full Name (Last, First, Middle Initial)
C. RUBIO VICTORY COMMITTEE

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00494617

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
879276.39

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 21 / 2015
Transaction ID : SA12.802988

Amount of Each Receipt this Period
59382.00

TRANSFER

TRANSFER NET JF PROCEEDS

SUBTOTAL of Receipts This Page (optional).....▶	59382.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 315 OF 490
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. RUBIO VICTORY COMMITTEE		Date of Receipt MM / DD / YYYY 01 / 29 / 2015 Transaction ID : SA12.802989
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Receipt this Period 100000.00
City ALEXANDRIA	State VA	Zip Code 22314-5404
FEC ID number of contributing federal political committee. C C00494617		TRANSFER
Name of Employer	Occupation	TRANSFER NET JF PROCEEDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 879276.39	

Full Name (Last, First, Middle Initial) B. RUBIO VICTORY COMMITTEE		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA12.802990
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Receipt this Period 37400.00
City ALEXANDRIA	State VA	Zip Code 22314-5404
FEC ID number of contributing federal political committee. C C00494617		TRANSFER
Name of Employer	Occupation	TRANSFER NET JF PROCEEDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 879276.39	

Full Name (Last, First, Middle Initial) C. RUBIO VICTORY COMMITTEE		Date of Receipt MM / DD / YYYY 03 / 31 / 2015 Transaction ID : SA12.802993
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Receipt this Period 50000.00
City ALEXANDRIA	State VA	Zip Code 22314-5404
FEC ID number of contributing federal political committee. C C00494617		TRANSFER
Name of Employer	Occupation	TRANSFER NET JF PROCEEDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 879276.39	

SUBTOTAL of Receipts This Page (optional).....▶	187400.00
TOTAL This Period (last page this line number only).....▶	879276.39

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. WAYNE BERMAN

Mailing Address 3055 WHITEHAVEN ST NW

City WASHINGTON State DC Zip Code 20008-3613

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2015

Transaction ID : **SB21B.I9657**

Amount of Each Disbursement this Period

1263.25

Full Name (Last, First, Middle Initial)

B. PATROON

Mailing Address 160 E 46TH ST.

City NEW YORK State NY Zip Code 10017

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2015

Transaction ID : **SB21B.I9790**

Amount of Each Disbursement this Period

1263.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ZACHARY BURR

Mailing Address 1458 MONARCH CIR

City NAPLES State FL Zip Code 34116

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2015

Transaction ID : **SB21B.I9658**

Amount of Each Disbursement this Period

4000.00

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

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

5263.25

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ZACHARY BURR

Mailing Address 1458 MONARCH CIR

City NAPLES State FL Zip Code 34116

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2015

Transaction ID : **SB21B.I9659**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. ALEX CONANT

Mailing Address 1851 BILTMORE ST., NW #B

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : **SB21B.I9617**

Amount of Each Disbursement this Period

8470.29

Full Name (Last, First, Middle Initial)

C. ALEX CONANT

Mailing Address 1851 BILTMORE ST., NW #B

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9618**

Amount of Each Disbursement this Period

587.20

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

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

13057.49

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.I9792

Amount of Each Disbursement this Period

209.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354-1989

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.I9791

Amount of Each Disbursement this Period

378.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ROBERT DANIELS

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2015

Transaction ID : SB21B.I9634

Amount of Each Disbursement this Period

1000.00

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

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

1000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ROBERT DANIELS

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : **SB21B.I9635**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ROBERT DANIELS

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : **SB21B.I9636**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ROBERT DANIELS

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9637**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. BEN HELLER

Mailing Address PO BOX 320825

City ALEXANDRIA State VA Zip Code 22320

Purpose of Disbursement
NON COMMERCIAL AIR TRAVEL

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
0	3		0	9		2	0	1	5

Transaction ID : SB21B.I9620

Amount of Each Disbursement this Period

4	2	7	6	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. VALERIE MACK

Mailing Address 215 12TH STREET NE
APT 3

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

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
0	1		0	7		2	0	1	5

Transaction ID : SB21B.I9652

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. VALERIE MACK

Mailing Address 215 12TH STREET NE
APT 3

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

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
0	1		2	6		2	0	1	5

Transaction ID : SB21B.I9653

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

6	2	7	6	.	0	0
---	---	---	---	---	---	---

6	2	7	6	.	0	0
---	---	---	---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. VALERIE MACK

Mailing Address 215 12TH STREET NE
APT 3

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

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
02 / 26 / 2015

Transaction ID : SB21B.I9654

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. VALERIE MACK

Mailing Address 215 12TH STREET NE
APT 3

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

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
03 / 17 / 2015

Transaction ID : SB21B.I9655

Amount of Each Disbursement this Period

54.50

Full Name (Last, First, Middle Initial)

C. VALERIE MACK

Mailing Address 215 12TH STREET NE
APT 3

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

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
03 / 31 / 2015

Transaction ID : SB21B.I9656

Amount of Each Disbursement this Period

1000.00

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

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

2054.50

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2015

Transaction ID : SB21B.I9606

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

B. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : SB21B.I9607

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

C. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2015

Transaction ID : SB21B.I9608

Amount of Each Disbursement this Period

804.38

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

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

5296.38

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : **SB21B.I9609**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

B. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9610**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

C. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.I9611**

Amount of Each Disbursement this Period

2246.00

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

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

6738.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ALBERTO MARTINEZ

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : SB21B.I9612

Amount of Each Disbursement this Period

11246.00

Full Name (Last, First, Middle Initial)

B. DORINDA MOSS

Mailing Address 3722 MUNSON ROAD

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : SB21B.I9621

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

C. DORINDA MOSS

Mailing Address 3722 MUNSON ROAD

City FALLS CHURCH State VA Zip Code 22041

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : SB21B.I9622

Amount of Each Disbursement this Period

4500.00

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

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

11246.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2015

Transaction ID : **SB21B.I9645**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

B. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : **SB21B.I9646**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

C. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : **SB21B.I9647**

Amount of Each Disbursement this Period

449.52

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

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

4941.52

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN EXPRESS

Mailing Address 9400 19TH LANE

City VERO BEACH State FL Zip Code 32960

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : **SB21B.I9793**

Amount of Each Disbursement this Period

449.52

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : **SB21B.I9648**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

C. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9649**

Amount of Each Disbursement this Period

2246.00

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

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

4492.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.I9650**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

B. TODD REID

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : **SB21B.I9651**

Amount of Each Disbursement this Period

2246.00

Full Name (Last, First, Middle Initial)

C. ANNA ROGERS

Mailing Address 503 C ST., NE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : **SB21B.I9619**

Amount of Each Disbursement this Period

2517.59

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

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

7009.59

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MARSHALL SALTER

Mailing Address 308 W. MYRTLE ST.

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 08 / 2015

Transaction ID : **SB21B.I10174**

Amount of Each Disbursement this Period: 7000.00

Category/Type

Full Name (Last, First, Middle Initial)
B. TERRY SULLIVAN

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 07 / 2015

Transaction ID : **SB21B.I9638**

Amount of Each Disbursement this Period: 16500.00

Category/Type

Full Name (Last, First, Middle Initial)
C. TERRY SULLIVAN

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 26 / 2015

Transaction ID : **SB21B.I9639**

Amount of Each Disbursement this Period: 16500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40000.00

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. TERRY SULLIVAN		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 503 C ST. NE		Transaction ID : SB21B.I9640
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement STRATEGIC CONSULTING	Amount of Each Disbursement this Period 16500.00
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. TERRY SULLIVAN		Date of Disbursement MM / DD / YYYY 03 / 17 / 2015
Mailing Address 503 C ST. NE		Transaction ID : SB21B.I9641
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SEE MEMOS	Amount of Each Disbursement this Period 4484.58
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. HOTELS.COM		Date of Disbursement MM / DD / YYYY 03 / 17 / 2015
Mailing Address 10440 N. CENTRAL EXPWY SUITE 400		Transaction ID : SB21B.I9795
City DALLAS	State TX	
Zip Code 75231-2221	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 636.18
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).....▶	20984.58
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9794

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UNITED AIRWAYS

Mailing Address 77 W WACKER DR

City CHICAGO State IL Zip Code 60601-1604

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9797

Amount of Each Disbursement this Period

708.57

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9796

Amount of Each Disbursement this Period

2346.10

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TERRY SULLIVAN

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9642**

Amount of Each Disbursement this Period

16500.00

Full Name (Last, First, Middle Initial)

B. TERRY SULLIVAN

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.I9643**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. TERRY SULLIVAN

Mailing Address 503 C ST. NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : **SB21B.I9644**

Amount of Each Disbursement this Period

4000.00

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

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

24500.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MATT TERRILL

Mailing Address 410 NEW JERSEY AVE.

City WASHINGTON State DC Zip Code 20003-2429

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : **SB21B.I9626**

Amount of Each Disbursement this Period

1573.59

Full Name (Last, First, Middle Initial)

B. MATT TERRILL

Mailing Address 410 NEW JERSEY AVE.

City WASHINGTON State DC Zip Code 20003-2429

Purpose of Disbursement
TRAVEL-NO ITEMIZATION REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2015

Transaction ID : **SB21B.I9627**

Amount of Each Disbursement this Period

101.47

Full Name (Last, First, Middle Initial)

C. MATT TERRILL

Mailing Address 410 NEW JERSEY AVE.

City WASHINGTON State DC Zip Code 20003-2429

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2015

Transaction ID : **SB21B.I9628**

Amount of Each Disbursement this Period

1556.59

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

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

3231.65

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MATT TERRILL		Date of Disbursement MM / DD / YYYY 02 / 12 / 2015
Mailing Address 410 NEW JERSEY AVE.		Transaction ID : SB21B.I9629
City WASHINGTON	State DC	
Zip Code 20003-2429	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1556.59
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. MATT TERRILL		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 410 NEW JERSEY AVE.		Transaction ID : SB21B.I9630
City WASHINGTON	State DC	
Zip Code 20003-2429	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1581.59
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. MATT TERRILL		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 410 NEW JERSEY AVE.		Transaction ID : SB21B.I9631
City WASHINGTON	State DC	
Zip Code 20003-2429	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1581.59
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).....▶	4719.77
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MATT TERRILL

Mailing Address 410 NEW JERSEY AVE.

City WASHINGTON State DC Zip Code 20003-2429

Purpose of Disbursement
SALARY

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
03	/	30	/	2015

Transaction ID : SB21B.I9632

Amount of Each Disbursement this Period

1581.59

Full Name (Last, First, Middle Initial)

B. MATT TERRILL

Mailing Address 410 NEW JERSEY AVE.

City WASHINGTON State DC Zip Code 20003-2429

Purpose of Disbursement
SALARY

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
04	/	14	/	2015

Transaction ID : SB21B.I9633

Amount of Each Disbursement this Period

1581.59

Full Name (Last, First, Middle Initial)

C. MR. FRANK VANDERSLOOT

Mailing Address P.O. BOX 50277

City IDAHO FALLS State ID Zip Code 83405

Purpose of Disbursement
NON COMMERCIAL AIR TRAVEL

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
03	/	30	/	2015

Transaction ID : SB21B.I9623

Amount of Each Disbursement this Period

2211.00

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

5374.18

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

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MR. FRANK VANDERSLOOT		Date of Disbursement MM / DD / YYYY 04 / 01 / 2015
Mailing Address P.O. BOX 50277		Transaction ID : SB21B.I9624
City IDAHO FALLS	State ID	
Zip Code 83405	Purpose of Disbursement NON COMMERCIAL AIR TRAVEL	Amount of Each Disbursement this Period 4546.00
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. 516 LLC		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address P.O. BOX 131055		Transaction ID : SB21B.I9613
City HOUSTON	State TX	
Zip Code 77219-5809	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 6000.00
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. 516 LLC		Date of Disbursement MM / DD / YYYY 01 / 26 / 2015
Mailing Address P.O. BOX 131055		Transaction ID : SB21B.I9614
City HOUSTON	State TX	
Zip Code 77219-5809	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 6000.00
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).....▶	16546.00
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. 516 LLC

Mailing Address P.O. BOX 131055

City HOUSTON State TX Zip Code 77219-5809

Purpose of Disbursement
RENT

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
02		26		2015

Transaction ID : **SB21B.I9615**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. 516 LLC

Mailing Address P.O. BOX 131055

City HOUSTON State TX Zip Code 77219-5809

Purpose of Disbursement
RENT

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
03		31		2015

Transaction ID : **SB21B.I9616**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
01		02		2015

Transaction ID : **SB21B.I9660**

Amount of Each Disbursement this Period

7.95

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

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

12007.95

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
01 / 05 / 2015

Transaction ID : SB21B.I9661

Amount of Each Disbursement this Period

13.07

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
02 / 02 / 2015

Transaction ID : SB21B.I9662

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
02 / 05 / 2015

Transaction ID : SB21B.I9663

Amount of Each Disbursement this Period

155.94

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

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

176.96

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2015

Transaction ID : SB21B.I9664

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2015

Transaction ID : SB21B.I9665

Amount of Each Disbursement this Period

220.76

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2015

Transaction ID : SB21B.I9666

Amount of Each Disbursement this Period

7.95

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

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

236.66

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 06 / 2015

Transaction ID : **SB21B.I9667**

Amount of Each Disbursement this Period: 131.38

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 01 / 2015

Transaction ID : **SB21B.I9668**

Amount of Each Disbursement this Period: 7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 05 / 2015

Transaction ID : **SB21B.I9669**

Amount of Each Disbursement this Period: 389.34

SUBTOTAL of Disbursements This Page (optional)..... ▶ 528.67

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
06 / 02 / 2015

Transaction ID : SB21B.I9670

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS-MERCHANT

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEES

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
06 / 05 / 2015

Transaction ID : SB21B.I9671

Amount of Each Disbursement this Period

276.04

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

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
01 / 13 / 2015

Transaction ID : SB21B.I9680

Amount of Each Disbursement this Period

5000.00

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

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

5283.99

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9800

Amount of Each Disbursement this Period

219.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9801

Amount of Each Disbursement this Period

27.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9811

Amount of Each Disbursement this Period

44.96

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9812**

Amount of Each Disbursement this Period: 44.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9813**

Amount of Each Disbursement this Period: 100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City SALT LAKE CITY State UT Zip Code 84121

Purpose of Disbursement STORAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9830**

Amount of Each Disbursement this Period: 332.14

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
01	/	13	/	2015

Transaction ID : **SB21B.I9798**

Amount of Each Disbursement this Period

166.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
01	/	13	/	2015

Transaction ID : **SB21B.I9799**

Amount of Each Disbursement this Period

144.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
01	/	13	/	2015

Transaction ID : **SB21B.I9805**

Amount of Each Disbursement this Period

378.56

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. LOEWS HOTEL

Mailing Address 1177 15TH ST., NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
TRAVEL

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
01		13		2015

Transaction ID : **SB21B.I9824**

Amount of Each Disbursement this Period

221.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TVEYES INC.

Mailing Address 150 POST RD

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement
SUBSCRIPTION

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
01		13		2015

Transaction ID : **SB21B.I9810**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
01		13		2015

Transaction ID : **SB21B.I9814**

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9815

Amount of Each Disbursement this Period

14.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9816

Amount of Each Disbursement this Period

18.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9821

Amount of Each Disbursement this Period

12.67

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9825**

Amount of Each Disbursement this Period

10.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9826**

Amount of Each Disbursement this Period

10.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9827**

Amount of Each Disbursement this Period

54.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9828

Amount of Each Disbursement this Period

27.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9829

Amount of Each Disbursement this Period

9.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9803

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9804**

Amount of Each Disbursement this Period

185.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9807**

Amount of Each Disbursement this Period

560.52

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL CREDIT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : **SB21B.I9818**

Amount of Each Disbursement this Period

-15.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 13 / 2015

Transaction ID : **SB21B.I9822**

Amount of Each Disbursement this Period: 366.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 13 / 2015

Transaction ID : **SB21B.I9823**

Amount of Each Disbursement this Period: 366.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement SEE MEMOS

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2015

Transaction ID : **SB21B.I9681**

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

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
01		21		2015

Transaction ID : **SB21B.I9834**

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

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
01		21		2015

Transaction ID : **SB21B.I9838**

Amount of Each Disbursement this Period

550.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CASA TUA

Mailing Address 1700 JAMES AVE.

City State Zip Code
MIAMI BEACH FL 33139

Purpose of Disbursement
TRAVEL

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
01		21		2015

Transaction ID : **SB21B.I9835**

Amount of Each Disbursement this Period

316.23

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19134

Purpose of Disbursement
UTILITIES

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
01	/	21	/	2015

Transaction ID : SB21B.I9841

Amount of Each Disbursement this Period

328.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DELANO HOTEL

Mailing Address 1685 COLLINS AVE.

City MIAMI BEACH State FL Zip Code 33139

Purpose of Disbursement
TRAVEL

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
01	/	21	/	2015

Transaction ID : SB21B.I9837

Amount of Each Disbursement this Period

1801.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD
SUITE 500

City ITASCA State IL Zip Code 60143

Purpose of Disbursement
TRAVEL

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
01	/	21	/	2015

Transaction ID : SB21B.I9839

Amount of Each Disbursement this Period

39.95

[MEMO ITEM]

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)
Reclaim America PAC

A. RACKSPACE CLOUD

Full Name (Last, First, Middle Initial)

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement ONLINE SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2015

Transaction ID : **SB21B.I9843**

Amount of Each Disbursement this Period: 260.35

[MEMO ITEM]

B. RACKSPACE CLOUD

Full Name (Last, First, Middle Initial)

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement ONLINE SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2015

Transaction ID : **SB21B.I9844**

Amount of Each Disbursement this Period: 390.99

[MEMO ITEM]

C. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2015

Transaction ID : **SB21B.I9832**

Amount of Each Disbursement this Period: 11.91

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2015

Transaction ID : **SB21B.I9833**

Amount of Each Disbursement this Period

13.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2015

Transaction ID : **SB21B.I9840**

Amount of Each Disbursement this Period

952.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2015

Transaction ID : **SB21B.I9842**

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9682**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. AMAZON

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9869**

Amount of Each Disbursement this Period

119.38

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9875**

Amount of Each Disbursement this Period

33.98

[MEMO ITEM]

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

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

5000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMAZON

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9881**

Amount of Each Disbursement this Period

22.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19134

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9874**

Amount of Each Disbursement this Period

322.33

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City SALT LAKE CITY State UT Zip Code 84121

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9863**

Amount of Each Disbursement this Period

332.14

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD
SUITE 500

City ITASCA State IL Zip Code 60143

Purpose of Disbursement
TRAVEL

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
0	1		2	3		2	0	1	5

Transaction ID : **SB21B.I9873**

Amount of Each Disbursement this Period

3	9	.	9	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1		2	3		2	0	1	5

Transaction ID : **SB21B.I9856**

Amount of Each Disbursement this Period

4	5	.	5	1
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1		2	3		2	0	1	5

Transaction ID : **SB21B.I9857**

Amount of Each Disbursement this Period

1	6	.	8	4
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[MEMO ITEM]

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9870**

Amount of Each Disbursement this Period

120.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9877**

Amount of Each Disbursement this Period

253.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9884**

Amount of Each Disbursement this Period

382.10

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. STARR RESTAURANTS

Mailing Address 325 CHESTNUT ST.

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9878**

Amount of Each Disbursement this Period

202.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STARR RESTAURANTS

Mailing Address 325 CHESTNUT ST.

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9879**

Amount of Each Disbursement this Period

202.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STARR RESTAURANTS

Mailing Address 325 CHESTNUT ST.

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9880**

Amount of Each Disbursement this Period

102.39

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TVEYES INC.

Mailing Address 150 POST RD

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9849**

Amount of Each Disbursement this Period: 500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9846**

Amount of Each Disbursement this Period: 8.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9852**

Amount of Each Disbursement this Period: 8.25

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
01		23		2015

Transaction ID : **SB21B.I9853**

Amount of Each Disbursement this Period

7.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
01		23		2015

Transaction ID : **SB21B.I9858**

Amount of Each Disbursement this Period

5.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
01		23		2015

Transaction ID : **SB21B.I9859**

Amount of Each Disbursement this Period

17.81

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9860**

Amount of Each Disbursement this Period

9.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9861**

Amount of Each Disbursement this Period

23.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9862**

Amount of Each Disbursement this Period

15.12

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9864**

Amount of Each Disbursement this Period

5.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9866**

Amount of Each Disbursement this Period

14.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9867**

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9868**

Amount of Each Disbursement this Period: 11.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9871**

Amount of Each Disbursement this Period: 6.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2015

Transaction ID : **SB21B.I9872**

Amount of Each Disbursement this Period: 13.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9882**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9886**

Amount of Each Disbursement this Period

14.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9887**

Amount of Each Disbursement this Period

14.15

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		2	3		2	0	1	5

Transaction ID : SB21B.I9888

Amount of Each Disbursement this Period

1	1	.	6	5
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		2	3		2	0	1	5

Transaction ID : SB21B.I9889

Amount of Each Disbursement this Period

6	.	2	7
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		2	3		2	0	1	5

Transaction ID : SB21B.I9890

Amount of Each Disbursement this Period

1	5	.	0	0
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[MEMO ITEM]

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

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

0	.	0	0
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0	.	0	0
---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9892**

Amount of Each Disbursement this Period

7.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9894**

Amount of Each Disbursement this Period

14.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9895**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9896**

Amount of Each Disbursement this Period

6.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20536

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9854**

Amount of Each Disbursement this Period

342.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB21B.I9845**

Amount of Each Disbursement this Period

272.53

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s)
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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

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
0	1		2	3		2	0	1	5

Transaction ID : **SB21B.I9876**

Amount of Each Disbursement this Period

8	0	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

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
0	1		2	3		2	0	1	5

Transaction ID : **SB21B.I9885**

Amount of Each Disbursement this Period

4	6	.	5	8
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

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
0	1		3	0		2	0	1	5

Transaction ID : **SB21B.I9683**

Amount of Each Disbursement this Period

1	2	.	7	8	6	.	9	1
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	2	.	7	8	6	.	9	1
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		.				.		
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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : **SB21B.I9970**

Amount of Each Disbursement this Period

1454.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAOS CLEANING SERVICE

Mailing Address 1818 VERNON ST. NW
APT. 201

City State Zip Code
WASHINGTON DC 20009

Purpose of Disbursement
OFFICE CLEANING

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
01		30		2015

Transaction ID : **SB21B.I9932**

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAOS CLEANING SERVICE

Mailing Address 1818 VERNON ST. NW
APT. 201

City State Zip Code
WASHINGTON DC 20009

Purpose of Disbursement
OFFICE CLEANING

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
01		30		2015

Transaction ID : **SB21B.I9933**

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SOUTHEAST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9897**

Amount of Each Disbursement this Period

450.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19134

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9931**

Amount of Each Disbursement this Period

324.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DELANO HOTEL

Mailing Address 1685 COLLINS AVE.

City MIAMI BEACH State FL Zip Code 33139

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9946**

Amount of Each Disbursement this Period

270.95

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9911**

Amount of Each Disbursement this Period

662.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9930**

Amount of Each Disbursement this Period

80.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City SALT LAKE CITY State UT Zip Code 84121

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9905**

Amount of Each Disbursement this Period

332.14

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD
SUITE 500

City ITASCA State IL Zip Code 60143

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : SB21B.I9923

Amount of Each Disbursement this Period

39.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : SB21B.I9922

Amount of Each Disbursement this Period

154.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : SB21B.I9947

Amount of Each Disbursement this Period

287.60

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. LA AVENIDA INN

Mailing Address 1315 ORANGE AVE.

City CORONADO State CA Zip Code 92118

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9921

Amount of Each Disbursement this Period

765.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9915

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9927

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MACNAIR TRAVEL		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address 1101 KING ST. #190		Transaction ID : SB21B.I9928
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 20.00
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. MACNAIR TRAVEL		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address 1101 KING ST. #190		Transaction ID : SB21B.I9929
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 45.00
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. OFFICE DEPOT		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address 6600 NORTH MILITARY TRAIL		Transaction ID : SB21B.I9951
City BOCA RATON	State FL	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 82.66
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).....▶	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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9952**

Amount of Each Disbursement this Period

23.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9938**

Amount of Each Disbursement this Period

259.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9956**

Amount of Each Disbursement this Period

391.48

[MEMO ITEM]

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

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

0.00

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9916

Amount of Each Disbursement this Period

3	8	3	.	2	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 6731 FRONTIER DR

City SPRINGFIELD State VA Zip Code 22150

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9898

Amount of Each Disbursement this Period

7	8	.	0	3
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 6731 FRONTIER DR

City SPRINGFIELD State VA Zip Code 22150

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9954

Amount of Each Disbursement this Period

3	6	9	.	0	3
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
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0	0	0
---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TVEYES INC.

Mailing Address 150 POST RD

City State Zip Code
FAIRFIELD CT 06824

Purpose of Disbursement
SUBSCRIPTION

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
01		30		2015

Transaction ID : **SB21B.I9914**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : **SB21B.I9904**

Amount of Each Disbursement this Period

10.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
01		30		2015

Transaction ID : **SB21B.I9906**

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9907**

Amount of Each Disbursement this Period

17.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9908**

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9909**

Amount of Each Disbursement this Period

13.87

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9910

Amount of Each Disbursement this Period

14.89

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9912

Amount of Each Disbursement this Period

32.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9913

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			3	0			2	0	1	5		

Transaction ID : SB21B.I9918

Amount of Each Disbursement this Period

5	.	8	9
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			3	0			2	0	1	5		

Transaction ID : SB21B.I9919

Amount of Each Disbursement this Period

1	0	.	5	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			3	0			2	0	1	5		

Transaction ID : SB21B.I9920

Amount of Each Disbursement this Period

7	.	5	1
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[MEMO ITEM]

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9926

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											1	2	3	4	5	6	7	8	9	0	
											1	2	3	4	5	6	7	8	9	0	

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9939

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											3	0	5	1							
											3	0	5	1							

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9942

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											1	7	3	3							
											1	7	3	3							

[MEMO ITEM]

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

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

0	0	0	0	0	0	0	0	0	0	.	0	0	0	0	0	0	0	0	0	0
											0	0	0	0						

0	0	0	0	0	0	0	0	0	0	.	0	0	0	0	0	0	0	0	0	0
											0	0	0	0						

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9943

Amount of Each Disbursement this Period

15.78

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9944

Amount of Each Disbursement this Period

20.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9949

Amount of Each Disbursement this Period

21.45

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9950

Amount of Each Disbursement this Period

2	7	.	5	8
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9955

Amount of Each Disbursement this Period

1	1	.	3	8
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9958

Amount of Each Disbursement this Period

6	.	6	0
---	---	---	---

[MEMO ITEM]

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9959

Amount of Each Disbursement this Period

15.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9960

Amount of Each Disbursement this Period

8.37

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9961

Amount of Each Disbursement this Period

13.56

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Transaction ID : SB21B.I9962

Amount of Each Disbursement this Period

6.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Transaction ID : SB21B.I9964

Amount of Each Disbursement this Period

13.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Transaction ID : SB21B.I9965

Amount of Each Disbursement this Period

17.68

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9966

Amount of Each Disbursement this Period

7	.	4	3
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9967

Amount of Each Disbursement this Period

1	2	.	7	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9969

Amount of Each Disbursement this Period

3	1	.	0	0
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[MEMO ITEM]

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9899**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9900**

Amount of Each Disbursement this Period

208.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9901**

Amount of Each Disbursement this Period

208.10

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
01	/	30	/	2015

Transaction ID : **SB21B.I9902**

Amount of Each Disbursement this Period

536.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
01	/	30	/	2015

Transaction ID : **SB21B.I9903**

Amount of Each Disbursement this Period

536.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
01	/	30	/	2015

Transaction ID : **SB21B.I9924**

Amount of Each Disbursement this Period

434.20

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9925

Amount of Each Disbursement this Period

445.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9935

Amount of Each Disbursement this Period

79.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9936

Amount of Each Disbursement this Period

341.09

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
01	/	30	/	2015

Transaction ID : **SB21B.I9937**

Amount of Each Disbursement this Period

341.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
01	/	30	/	2015

Transaction ID : **SB21B.I9941**

Amount of Each Disbursement this Period

149.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address P.O. BOX 660794

City State Zip Code
DALLAS TX 75266

Purpose of Disbursement
CELL PHONE/INTERNET

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
01	/	30	/	2015

Transaction ID : **SB21B.I9934**

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

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
0	1		3	0		2	0	1	5

Transaction ID : **SB21B.I9957**

Amount of Each Disbursement this Period

2	9	7	.	8	1
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. WOOBX

Mailing Address 810 MAIN ST.

City VANCOUVER State WA Zip Code 98660

Purpose of Disbursement
ONLINE SERVICES

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
0	1		3	0		2	0	1	5

Transaction ID : **SB21B.I9917**

Amount of Each Disbursement this Period

2	4	9	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

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
0	2		1	2		2	0	1	5

Transaction ID : **SB21B.I9684**

Amount of Each Disbursement this Period

2	8	7	.	1	3	9
---	---	---	---	---	---	---

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

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

2	8	7	.	1	3	9
---	---	---	---	---	---	---

2	8	7	.	1	3	9
---	---	---	---	---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I9973

Amount of Each Disbursement this Period

89.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City SALT LAKE CITY State UT Zip Code 84121

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I9976

Amount of Each Disbursement this Period

332.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY #400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I9977

Amount of Each Disbursement this Period

246.41

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9978**

Amount of Each Disbursement this Period

911.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9972**

Amount of Each Disbursement this Period

12.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9974**

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]

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

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

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9975**

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9982**

Amount of Each Disbursement this Period

12.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9971**

Amount of Each Disbursement this Period

467.10

[MEMO ITEM]

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

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9979**

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9980**

Amount of Each Disbursement this Period

59.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **SB21B.I9981**

Amount of Each Disbursement this Period

275.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : SB21B.I9685

Amount of Each Disbursement this Period

2821.25

Category/
Type

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : SB21B.I9984

Amount of Each Disbursement this Period

489.10

Category/
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : SB21B.I9985

Amount of Each Disbursement this Period

473.60

Category/
Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2821.25

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL CREDIT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9996**

Amount of Each Disbursement this Period

-1454.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9997**

Amount of Each Disbursement this Period

642.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9998**

Amount of Each Disbursement this Period

169.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CAOS CLEANING SERVICE

Mailing Address 1818 VERNON ST. NW
APT. 201

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
OFFICE CLEANING

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
02	/	17	/	2015

Transaction ID : **SB21B.I9990**

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SOUTHEAST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CATERING

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
02	/	17	/	2015

Transaction ID : **SB21B.I10002**

Amount of Each Disbursement this Period

456.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL SUITES

Mailing Address 200 C ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
LODGING

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
02	/	17	/	2015

Transaction ID : **SB21B.I10008**

Amount of Each Disbursement this Period

664.00

[MEMO ITEM]

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)
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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. MACNAIR TRAVEL

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I9983**

Amount of Each Disbursement this Period: 20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. OFFICE DEPOT

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I9986**

Amount of Each Disbursement this Period: 38.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. OFFICE DEPOT

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I9987**

Amount of Each Disbursement this Period: 144.08

[MEMO ITEM]

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)
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Detailed Summary Page

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(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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9999**

Amount of Each Disbursement this Period

8.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10005**

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9989**

Amount of Each Disbursement this Period

455.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10000**

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10003**

Amount of Each Disbursement this Period

9.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10004**

Amount of Each Disbursement this Period

9.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10007**

Amount of Each Disbursement this Period

11.79

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10009**

Amount of Each Disbursement this Period

21.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9988**

Amount of Each Disbursement this Period

9.68

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9991**

Amount of Each Disbursement this Period

17.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9993**

Amount of Each Disbursement this Period

35.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9994**

Amount of Each Disbursement this Period

17.12

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9995**

Amount of Each Disbursement this Period: 15.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I10001**

Amount of Each Disbursement this Period: 256.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

Transaction ID : **SB21B.I9992**

Amount of Each Disbursement this Period: 44.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I9686

Amount of Each Disbursement this Period

4229.45

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY #400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I10015

Amount of Each Disbursement this Period

352.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY #400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I10016

Amount of Each Disbursement this Period

128.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4229.45

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Date of Disbursement: MM / DD / YYYY
02 / 18 / 2015

Mailing Address: 10440 NORTH CENTRAL EXPRESSWAY #400

City: DALLAS State: TX Zip Code: 75231

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10017**

Amount of Each Disbursement this Period: 352.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Date of Disbursement: MM / DD / YYYY
02 / 18 / 2015

Mailing Address: 10440 NORTH CENTRAL EXPRESSWAY #400

City: DALLAS State: TX Zip Code: 75231

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10018**

Amount of Each Disbursement this Period: 553.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Date of Disbursement: MM / DD / YYYY
02 / 18 / 2015

Mailing Address: 10440 NORTH CENTRAL EXPRESSWAY #400

City: DALLAS State: TX Zip Code: 75231

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10019**

Amount of Each Disbursement this Period: 440.70

[MEMO ITEM]

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

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<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
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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10023**

Amount of Each Disbursement this Period

40.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR.

City CHICAGO State IL Zip Code 60606-6423

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10020**

Amount of Each Disbursement this Period

498.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10010**

Amount of Each Disbursement this Period

74.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I10011

Amount of Each Disbursement this Period

74.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I10012

Amount of Each Disbursement this Period

218.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : SB21B.I10013

Amount of Each Disbursement this Period

521.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10014**

Amount of Each Disbursement this Period

521.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10021**

Amount of Each Disbursement this Period

15.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : **SB21B.I10022**

Amount of Each Disbursement this Period

180.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

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
02		18		2015

Transaction ID : **SB21B.I10025**

Amount of Each Disbursement this Period

238.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement
SEE MEMOS

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
03		04		2015

Transaction ID : **SB21B.I9687**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : **SB21B.I10043**

Amount of Each Disbursement this Period

370.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10000.00

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. DELTA AIR

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10042**

Amount of Each Disbursement this Period

405.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10028**

Amount of Each Disbursement this Period

219.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL CREDIT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10052**

Amount of Each Disbursement this Period

-276.85

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL CREDIT

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
03		04		2015

Transaction ID : SB21B.I10053

Amount of Each Disbursement this Period

-276.85

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : SB21B.I10057

Amount of Each Disbursement this Period

672.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
#400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : SB21B.I10058

Amount of Each Disbursement this Period

553.70

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address: 10440 NORTH CENTRAL EXPRESSWAY #400

City: DALLAS State: TX Zip Code: 75231

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10070**

Amount of Each Disbursement this Period: 97.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address: 10440 NORTH CENTRAL EXPRESSWAY #400

City: DALLAS State: TX Zip Code: 75231

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10071**

Amount of Each Disbursement this Period: 116.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address: 1101 KING ST. #190

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.I10033**

Amount of Each Disbursement this Period: 35.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.I10039

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.I10040

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.I10041

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : SB21B.I10055

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : SB21B.I10059

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL

Mailing Address 1101 KING ST. #190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : SB21B.I10060

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. RACKSPACE CLOUD

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address 1 FANATICAL PLACE

City: SAN ANTONIO State: TX Zip Code: 78218

Purpose of Disbursement: ONLINE SERVICES

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I10069**

Amount of Each Disbursement this Period: 263.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. TVEYES INC.

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address 150 POST RD

City: FAIRFIELD State: CT Zip Code: 06824

Purpose of Disbursement: SUBSCRIPTION

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I10032**

Amount of Each Disbursement this Period: 500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. UBER

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Mailing Address 1455 MARKET ST

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: TRAVEL

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I10056**

Amount of Each Disbursement this Period: 26.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10064**

Amount of Each Disbursement this Period

15.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR.

City State Zip Code
CHICAGO IL 60606-6423

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10031**

Amount of Each Disbursement this Period

498.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10026**

Amount of Each Disbursement this Period

528.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
03		04		2015

Transaction ID : **SB21B.I10027**

Amount of Each Disbursement this Period

528.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL CREDIT

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
03		04		2015

Transaction ID : **SB21B.I10029**

Amount of Each Disbursement this Period

-521.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL CREDIT

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
03		04		2015

Transaction ID : **SB21B.I10030**

Amount of Each Disbursement this Period

-521.10

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10034**

Amount of Each Disbursement this Period: 3.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10035**

Amount of Each Disbursement this Period: 605.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10036**

Amount of Each Disbursement this Period: 476.60

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10037**

Amount of Each Disbursement this Period: 201.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10038**

Amount of Each Disbursement this Period: 201.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10045**

Amount of Each Disbursement this Period: 605.10

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10046**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10047**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10048**

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10049**

Amount of Each Disbursement this Period

1135.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10050**

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
03 / 04 / 2015

Transaction ID : **SB21B.I10051**

Amount of Each Disbursement this Period

476.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

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
03	/	04	/	2015

Transaction ID : SB21B.I10062

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

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
03	/	04	/	2015

Transaction ID : SB21B.I10063

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

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
03	/	04	/	2015

Transaction ID : SB21B.I10066

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10067**

Amount of Each Disbursement this Period: 25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10068**

Amount of Each Disbursement this Period: 540.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **SB21B.I10065**

Amount of Each Disbursement this Period: 80.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. WOobox

Mailing Address 810 MAIN ST.

City VANCOUVER State WA Zip Code 98660

Purpose of Disbursement ONLINE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2015

Transaction ID : **SB21B.I10054**

Amount of Each Disbursement this Period: 249.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

Transaction ID : **SB21B.I9689**

Amount of Each Disbursement this Period: 13123.18

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

Transaction ID : **SB21B.I10083**

Amount of Each Disbursement this Period: 385.44

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13123.18

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. AMAZON

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10138**

Amount of Each Disbursement this Period: 73.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10126**

Amount of Each Disbursement this Period: 27.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10144**

Amount of Each Disbursement this Period: 60.01

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10145

Amount of Each Disbursement this Period

60.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10158

Amount of Each Disbursement this Period

228.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City FORT WORTH State TX Zip Code 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10159

Amount of Each Disbursement this Period

228.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10163**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CENTER BLVD.

City State Zip Code
FORT WORTH TX 76155-0000

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10164**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City State Zip Code
PHILADELPHIA PA 19134

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10095**

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19134

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10112**

Amount of Each Disbursement this Period: 12.85

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19134

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10170**

Amount of Each Disbursement this Period: 324.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COMFORT INN

Mailing Address 298 QUEEN CITY AVE.

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10075**

Amount of Each Disbursement this Period: 107.91

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. COMFORT INN

Mailing Address 298 QUEEN CITY AVE.

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10076**

Amount of Each Disbursement this Period: 113.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. COMFORT INN

Mailing Address 298 QUEEN CITY AVE.

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10077**

Amount of Each Disbursement this Period: 107.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. COMFORT INN

Mailing Address 298 QUEEN CITY AVE.

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10080**

Amount of Each Disbursement this Period: 107.91

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10115**

Amount of Each Disbursement this Period: 126.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT A CAR

Mailing Address 701 9TH ST NW

City WASHINGTON State DC Zip Code 20001-4572

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10154**

Amount of Each Disbursement this Period: 864.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City SALT LAKE CITY State UT Zip Code 84121

Purpose of Disbursement STORAGE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10097**

Amount of Each Disbursement this Period: 332.14

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. EXTRA SPACE STORAGE

Mailing Address 2795 EAST COTTONWOOD PARKWAY SUITE

City State Zip Code
SALT LAKE CITY UT 84121

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10160**

Amount of Each Disbursement this Period

332.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD
SUITE 500

City State Zip Code
ITASCA IL 60143

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10081**

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD
SUITE 500

City State Zip Code
ITASCA IL 60143

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10122**

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 Coast Ave.

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
SOFTWARE

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
05		11		2015

Transaction ID : SB21B.I10107

Amount of Each Disbursement this Period

302.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JETBLUE

Mailing Address 776 N TERMINAL DR

City SALT LAKE CITY State UT Zip Code 84122

Purpose of Disbursement
TRAVEL

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
05		11		2015

Transaction ID : SB21B.I10072

Amount of Each Disbursement this Period

290.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

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
05		11		2015

Transaction ID : SB21B.I10136

Amount of Each Disbursement this Period

149.13

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33427-2434

Purpose of Disbursement
OFFICE SUPPLIES

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
0	5			1	1			2	0	1	5		

Transaction ID : SB21B.I10137

Amount of Each Disbursement this Period

7	4	.	0	1
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

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
0	5			1	1			2	0	1	5		

Transaction ID : SB21B.I10085

Amount of Each Disbursement this Period

3	8	2	.	4	8
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

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
0	5			1	1			2	0	1	5		

Transaction ID : SB21B.I10118

Amount of Each Disbursement this Period

2	4	8	.	3	2
---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

0	0	0
---	---	---

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. RACKSPACE CLOUD

Mailing Address 1 FANATICAL PLACE

City SAN ANTONIO State TX Zip Code 78218

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10141

Amount of Each Disbursement this Period

373.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHERATON MIAMI AIRPORT

Mailing Address 3900 NW 21ST ST.

City MIAMI State FL Zip Code 33142

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10073

Amount of Each Disbursement this Period

144.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SHERATON MIAMI AIRPORT

Mailing Address 3900 NW 21ST ST.

City MIAMI State FL Zip Code 33142

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10074

Amount of Each Disbursement this Period

109.41

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TVEYES INC.

Mailing Address 150 POST RD

City State Zip Code
FAIRFIELD CT 06824

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2015

Transaction ID : **SB21B.I10109**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2015

Transaction ID : **SB21B.I10078**

Amount of Each Disbursement this Period

52.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2015

Transaction ID : **SB21B.I10087**

Amount of Each Disbursement this Period

29.93

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10088
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 27.16
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10089
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 13.58
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10090
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 25.66
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).....▶	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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10091

Amount of Each Disbursement this Period

41.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10098

Amount of Each Disbursement this Period

8.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10099

Amount of Each Disbursement this Period

8.81

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10102

Amount of Each Disbursement this Period

23.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10103

Amount of Each Disbursement this Period

9.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10104

Amount of Each Disbursement this Period

13.27

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10105

Amount of Each Disbursement this Period

7.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10106

Amount of Each Disbursement this Period

20.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10108

Amount of Each Disbursement this Period

24.67

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10111**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10113**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I10114**

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10116**

Amount of Each Disbursement this Period: 6.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10119**

Amount of Each Disbursement this Period: 13.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10121**

Amount of Each Disbursement this Period: 26.29

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10125**

Amount of Each Disbursement this Period: 11.85

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10127**

Amount of Each Disbursement this Period: 24.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10128**

Amount of Each Disbursement this Period: 15.50

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10129

Amount of Each Disbursement this Period

12.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10133

Amount of Each Disbursement this Period

40.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
TRAVEL

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
05 / 11 / 2015

Transaction ID : SB21B.I10134

Amount of Each Disbursement this Period

17.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10135**

Amount of Each Disbursement this Period

19.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10139**

Amount of Each Disbursement this Period

9.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10140**

Amount of Each Disbursement this Period

19.48

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10143
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 20.78
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10148
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 40.00
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10149
City SAN FRANCISCO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 12.46
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).....▶	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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10150
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 5.01
Candidate Name	Category/Type	[MEMO ITEM]
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10152
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 4.29
Candidate Name	Category/Type	[MEMO ITEM]
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. UBER		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 1455 MARKET ST		Transaction ID : SB21B.I10153
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 4.96
Candidate Name	Category/Type	[MEMO ITEM]
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).....▶	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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10155

Amount of Each Disbursement this Period

15.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10156

Amount of Each Disbursement this Period

7.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10157

Amount of Each Disbursement this Period

27.91

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10161

Amount of Each Disbursement this Period

5.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10162

Amount of Each Disbursement this Period

4.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
05	/	11	/	2015

Transaction ID : SB21B.I10167

Amount of Each Disbursement this Period

16.92

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10168**

Amount of Each Disbursement this Period: 5.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10169**

Amount of Each Disbursement this Period: 15.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10172**

Amount of Each Disbursement this Period: 24.99

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

Transaction ID : **SB21B.I10173**

Amount of Each Disbursement this Period: 36.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

Transaction ID : **SB21B.I10123**

Amount of Each Disbursement this Period: 326.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

Transaction ID : **SB21B.I10124**

Amount of Each Disbursement this Period: 326.00

[MEMO ITEM]

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10130

Amount of Each Disbursement this Period

491.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10131

Amount of Each Disbursement this Period

491.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10132

Amount of Each Disbursement this Period

588.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10086**

Amount of Each Disbursement this Period

297.81

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10117**

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address P.O. BOX 660794

City DALLAS State TX Zip Code 75266

Purpose of Disbursement
CELL PHONE/INTERNET

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **SB21B.I10142**

Amount of Each Disbursement this Period

297.81

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. WOobox

Mailing Address 810 MAIN ST.

City VANCOUVER State WA Zip Code 98660

Purpose of Disbursement
ONLINE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I10110

Amount of Each Disbursement this Period

249.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BERNSTEIN SHUR GROUP

Mailing Address 670 NORTH COMMERCIAL ST., STE. 108

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.I9777

Amount of Each Disbursement this Period

24000.00

Full Name (Last, First, Middle Initial)

C. BERNSTEIN SHUR GROUP

Mailing Address 670 NORTH COMMERCIAL ST., STE. 108

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : SB21B.I9778

Amount of Each Disbursement this Period

18000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

42000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CAOS CLEANING SERVICES LLC

Mailing Address 719 MADISON STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
OFFICE CLEANING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : **SB21B.I9690**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : **SB21B.I9691**

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2015

Transaction ID : **SB21B.I9692**

Amount of Each Disbursement this Period

33.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

686.37

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2015

Transaction ID : **SB21B.I9693**

Amount of Each Disbursement this Period

13.05

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : **SB21B.I9694**

Amount of Each Disbursement this Period

98.72

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **SB21B.I9695**

Amount of Each Disbursement this Period

502.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

614.07

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
02 / 06 / 2015

Transaction ID : SB21B.I9696

Amount of Each Disbursement this Period

1498.75

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
02 / 09 / 2015

Transaction ID : SB21B.I9697

Amount of Each Disbursement this Period

256.83

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
02 / 13 / 2015

Transaction ID : SB21B.I9698

Amount of Each Disbursement this Period

73.48

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1829.06

**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 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
02 / 20 / 2015

Transaction ID : SB21B.I9699

Amount of Each Disbursement this Period

45.54

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
02 / 23 / 2015

Transaction ID : SB21B.I9700

Amount of Each Disbursement this Period

6154.80

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
02 / 27 / 2015

Transaction ID : SB21B.I9701

Amount of Each Disbursement this Period

40.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6240.64

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
03 / 06 / 2015

Transaction ID : **SB21B.I9702**

Amount of Each Disbursement this Period

227.42

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
03 / 13 / 2015

Transaction ID : **SB21B.I9703**

Amount of Each Disbursement this Period

97.53

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
03 / 17 / 2015

Transaction ID : **SB21B.I9704**

Amount of Each Disbursement this Period

1333.10

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1658.05

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
03		20		2015

Transaction ID : SB21B.I9705

Amount of Each Disbursement this Period

65.86

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
03		27		2015

Transaction ID : SB21B.I9706

Amount of Each Disbursement this Period

16.23

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
04		03		2015

Transaction ID : SB21B.I9707

Amount of Each Disbursement this Period

141.31

SUBTOTAL of Disbursements This Page (optional)..... ▶

223.40

TOTAL This Period (last page this line number only)..... ▶

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : SB21B.I9708

Amount of Each Disbursement this Period

1599.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2015

Transaction ID : SB21B.I9709

Amount of Each Disbursement this Period

7.81

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2015

Transaction ID : SB21B.I9710

Amount of Each Disbursement this Period

355.75

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1962.56

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement CAGING/DATABASE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 24 / 2015

Transaction ID : **SB21B.I9711**

Amount of Each Disbursement this Period: 131.21

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 01 / 2015

Transaction ID : **SB21B.I9712**

Amount of Each Disbursement this Period: 16.09

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 08 / 2015

Transaction ID : **SB21B.I9713**

Amount of Each Disbursement this Period: 1.94

SUBTOTAL of Disbursements This Page (optional)..... ▶ 149.24

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
05 / 15 / 2015

Transaction ID : SB21B.I9714

Amount of Each Disbursement this Period

5.15

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
CAGING/DATABASE FEES

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
05 / 21 / 2015

Transaction ID : SB21B.I9715

Amount of Each Disbursement this Period

1358.10

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
05 / 22 / 2015

Transaction ID : SB21B.I9716

Amount of Each Disbursement this Period

21.08

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1384.33

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement CAGING/DATABASE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 10 / 2015

Transaction ID : **SB21B.I9717**

Amount of Each Disbursement this Period: 246.92

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 12 / 2015

Transaction ID : **SB21B.I9718**

Amount of Each Disbursement this Period: 14.59

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 19 / 2015

Transaction ID : **SB21B.I9719**

Amount of Each Disbursement this Period: 21.49

SUBTOTAL of Disbursements This Page (optional)..... ▶ 283.00

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEES

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
0	6		2	6		2	0	1	5

Transaction ID : SB21B.I9720

Amount of Each Disbursement this Period

4	9	.	9	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CONNECTION STRATEGY LLC

Mailing Address P.O. BOX 2192

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
WEB SERVICES

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
0	1		3	0		2	0	1	5

Transaction ID : SB21B.I9721

Amount of Each Disbursement this Period

9	5	.	2	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CONNECTION STRATEGY LLC

Mailing Address P.O. BOX 2192

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
WEB SERVICES

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
0	3		1	1		2	0	1	5

Transaction ID : SB21B.I9722

Amount of Each Disbursement this Period

5	0	.	8	6
---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	9	6	.	0	8
---	---	---	---	---	---

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CONNECTION STRATEGY LLC

Mailing Address P.O. BOX 2192

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : SB21B.I9723

Amount of Each Disbursement this Period

152.95

Full Name (Last, First, Middle Initial)

B. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2015

Transaction ID : SB21B.I9724

Amount of Each Disbursement this Period

8333.33

Full Name (Last, First, Middle Initial)

C. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : SB21B.I9725

Amount of Each Disbursement this Period

8333.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16819.61

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2015

Transaction ID : SB21B.I9726

Amount of Each Disbursement this Period

1031.10

Full Name (Last, First, Middle Initial)

B. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : SB21B.I9727

Amount of Each Disbursement this Period

8333.33

Full Name (Last, First, Middle Initial)

C. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB21B.I9728

Amount of Each Disbursement this Period

8333.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

17697.76

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CORE FOCUS CONSULTING

Mailing Address 533 N. OXFORD ST.

City ARLINGTON State VA Zip Code 22203-2224

Purpose of Disbursement
STRATEGIC CONSULTING

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
05 / 04 / 2015

Transaction ID : SB21B.I9729

Amount of Each Disbursement this Period

8333.00

Full Name (Last, First, Middle Initial)

B. CQ ROLL CALL

Mailing Address 77 K ST., NE-8TH FL.

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
SUBSCRIPTION

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
01 / 21 / 2015

Transaction ID : SB21B.I9730

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. CQ ROLL CALL

Mailing Address 77 K ST., NE-8TH FL.

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
SUBSCRIPTION

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
01 / 29 / 2015

Transaction ID : SB21B.I9731

Amount of Each Disbursement this Period

1750.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11833.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S. WASHINGTON ST., STE. B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2015

Transaction ID : SB21B.I9732

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S. WASHINGTON ST., STE. B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9733

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S. WASHINGTON ST., STE. B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2015

Transaction ID : SB21B.I9734

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S. WASHINGTON ST., STE. B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2015

Transaction ID : SB21B.I9735

Amount of Each Disbursement this Period: 5000.00

Category/Type

Full Name (Last, First, Middle Initial)

B. DIRECT RESPONSE STRATEGIES

Mailing Address 228 S. WASHINGTON ST., STE. B30

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement DIRECT MAIL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2015

Transaction ID : SB21B.I9736

Amount of Each Disbursement this Period: 19010.00

Category/Type

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement ACCOUNTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2015

Transaction ID : SB21B.I9737

Amount of Each Disbursement this Period: 986.19

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 24996.19

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2015

Transaction ID : SB21B.I9738

Amount of Each Disbursement this Period

978.19

Category/
Type

Full Name (Last, First, Middle Initial)

B. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I9739

Amount of Each Disbursement this Period

944.29

Category/
Type

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
ACCOUNTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB21B.I9740

Amount of Each Disbursement this Period

33.90

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1956.38

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 27 / 2015

Transaction ID : **SB21B.I9741**

Amount of Each Disbursement this Period
941.19

Full Name (Last, First, Middle Initial)
B. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 12 / 2015

Transaction ID : **SB21B.I9742**

Amount of Each Disbursement this Period
874.44

Full Name (Last, First, Middle Initial)
C. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2015

Transaction ID : **SB21B.I9743**

Amount of Each Disbursement this Period
6129.50

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7945.13

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement ACCOUNTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 30 / 2015

Transaction ID : **SB21B.I9744**

Amount of Each Disbursement this Period: 35.30

Category/Type

Full Name (Last, First, Middle Initial)
B. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 14 / 2015

Transaction ID : **SB21B.I9745**

Amount of Each Disbursement this Period: 840.54

Category/Type

Full Name (Last, First, Middle Initial)
C. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 19 MIDSTATE DR.

City AUBURN State MA Zip Code 01501

Purpose of Disbursement ACCOUNTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 14 / 2015

Transaction ID : **SB21B.I9746**

Amount of Each Disbursement this Period: 33.90

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 909.74

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE
SUITE 100

City WARRENTOWN State VA Zip Code 20186

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2015

Transaction ID : SB21B.I9748

Amount of Each Disbursement this Period

19823.46

Category/
Type

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE
SUITE 100

City WARRENTOWN State VA Zip Code 20186

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9749

Amount of Each Disbursement this Period

4081.25

Category/
Type

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE
SUITE 100

City WARRENTOWN State VA Zip Code 20186

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2015

Transaction ID : SB21B.I9750

Amount of Each Disbursement this Period

4306.25

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

28210.96

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. HUCKABY DAVIS LISKER, INC.

Mailing Address 228 S. WASHINGTON ST., STE. 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9751

Amount of Each Disbursement this Period

19574.43

Full Name (Last, First, Middle Initial)

B. MILLER SPENCE GROUP LLC

Mailing Address P.O. BOX 7557

City ARLINGTON State VA Zip Code 22207-0557

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2015

Transaction ID : SB21B.I9752

Amount of Each Disbursement this Period

6070.00

Full Name (Last, First, Middle Initial)

C. MILLER SPENCE GROUP LLC

Mailing Address P.O. BOX 7557

City ARLINGTON State VA Zip Code 22207-0557

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9753

Amount of Each Disbursement this Period

5400.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31044.43

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MILLER SPENCE GROUP LLC

Mailing Address P.O. BOX 7557

City ARLINGTON State VA Zip Code 22207-0557

Purpose of Disbursement
FUNDRAISING CONSULTING

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
0	6		0	8		2	0	1	5

Transaction ID : SB21B.I9754

Amount of Each Disbursement this Period

3	9	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. NATIONAL VICTORY STRATEGIES LLC

Mailing Address 7342 BRIELLA DRIVE

City BOYNTON BEACH State FL Zip Code 33437

Purpose of Disbursement
STRATEGIC CONSULTING

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
0	1		0	7		2	0	1	5

Transaction ID : SB21B.I9755

Amount of Each Disbursement this Period

3	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. NATIONAL VICTORY STRATEGIES LLC

Mailing Address 7342 BRIELLA DRIVE

City BOYNTON BEACH State FL Zip Code 33437

Purpose of Disbursement
STRATEGIC CONSULTING

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
0	1		2	9		2	0	1	5

Transaction ID : SB21B.I9756

Amount of Each Disbursement this Period

3	0	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9	9	0	0	.	0	0
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9	9	0	0	.	0	0
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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. NATIONAL VICTORY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 7342 BRIELLA DRIVE		Transaction ID : SB21B.I9757
City BOYNTON BEACH	State FL	
Purpose of Disbursement STRATEGIC CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3000.00
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. NATIONAL VICTORY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 04 / 22 / 2015
Mailing Address 7342 BRIELLA DRIVE		Transaction ID : SB21B.I9758
City BOYNTON BEACH	State FL	
Purpose of Disbursement STRATEGIC CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3000.00
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. NEBS		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address PO BOX 64468		Transaction ID : SB21B.I9759
City ST. PAUL	State MN	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 262.43
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).....▶	6262.43
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ON THE MARK

Mailing Address 807 GERVAIS ST

City COLUMBIA State SC Zip Code 29201-3162

Purpose of Disbursement
DIRECT MAIL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9760

Amount of Each Disbursement this Period

31175.00

Full Name (Last, First, Middle Initial)

B. OPTIMUS CONSULTING LLC

Mailing Address 611 PENNSYLVANIA AVE., SE
BOX 269

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2015

Transaction ID : SB21B.I9761

Amount of Each Disbursement this Period

40178.66

Full Name (Last, First, Middle Initial)

C. PARAMOUNT COMMUNICATIONS INC.

Mailing Address 525-K EAST MARKET STREET
SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2015

Transaction ID : SB21B.I9762

Amount of Each Disbursement this Period

3225.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

74578.66

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. PARAMOUNT COMMUNICATIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address 525-K EAST MARKET STREET
SUITE 114

Transaction ID : SB21B.I9763

City LEESBURG State VA Zip Code 20176

Amount of Each Disbursement this Period

6585.44

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. PARAMOUNT COMMUNICATIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Mailing Address 525-K EAST MARKET STREET
SUITE 114

Transaction ID : SB21B.I9764

City LEESBURG State VA Zip Code 20176

Amount of Each Disbursement this Period

3100.00

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. PARAMOUNT COMMUNICATIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2015

Mailing Address 525-K EAST MARKET STREET
SUITE 114

Transaction ID : SB21B.I9765

City LEESBURG State VA Zip Code 20176

Amount of Each Disbursement this Period

3100.00

Purpose of Disbursement
WEB SERVICES

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12785.44

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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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. PUSH DIGITAL

Mailing Address P.O. BOX 7431

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : SB21B.I9767

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. PUSH DIGITAL

Mailing Address P.O. BOX 7431

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2015

Transaction ID : SB21B.I9768

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. PUSH DIGITAL

Mailing Address P.O. BOX 7431

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : SB21B.I9769

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

22000.00

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 3840 SW 30TH AVE.

City State Zip Code
FT. LAUDERDALE FL 33312

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 28 / 2015

Transaction ID : **SB21B.I9770**

Amount of Each Disbursement this Period

300.77

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 3840 SW 30TH AVE.

City State Zip Code
FT. LAUDERDALE FL 33312

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 17 / 2015

Transaction ID : **SB21B.I9771**

Amount of Each Disbursement this Period

12091.12

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 3840 SW 30TH AVE.

City State Zip Code
FT. LAUDERDALE FL 33312

Purpose of Disbursement
COMPLIANCE CONSULTING/DELIVERY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
05 / 21 / 2015

Transaction ID : **SB21B.I9772**

Amount of Each Disbursement this Period

4200.85

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16592.74

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. RED SEA LLC

Mailing Address 4550 MONTGOMERY AVENUE
NORTH TOWER

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 22 / 2015

Transaction ID : **SB21B.I9773**

Amount of Each Disbursement this Period: 12978.50

Category/Type

Full Name (Last, First, Middle Initial)
B. SHEALAH CRAIGHEAD PHOTOGRAPHY

Mailing Address P.O. BOX 11547

City WASHINGTON State DC Zip Code 20008-0747

Purpose of Disbursement EVENT PHOTOGRAPHY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 25 / 2015

Transaction ID : **SB21B.I9774**

Amount of Each Disbursement this Period: 3304.15

Category/Type

Full Name (Last, First, Middle Initial)
C. SHEALAH CRAIGHEAD PHOTOGRAPHY

Mailing Address P.O. BOX 11547

City WASHINGTON State DC Zip Code 20008-0747

Purpose of Disbursement EVENT PHOTOGRAPHY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 25 / 2015

Transaction ID : **SB21B.I9775**

Amount of Each Disbursement this Period: 7440.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 23722.65

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. SOMETHING ELSE STRATEGIES

Mailing Address 112 LANTERN RIDGE DR.

City EASLEY State SC Zip Code 29642-8289

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : **SB21B.I9776**

Amount of Each Disbursement this Period

25969.97

Full Name (Last, First, Middle Initial)

B. TRANS WORLD JETS

Mailing Address 848 BRICKELL AVENUE
SUITE 600

City MIAMI State FL Zip Code 33131

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : **SB21B.I9779**

Amount of Each Disbursement this Period

5271.80

Full Name (Last, First, Middle Initial)

C. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : **SB21B.I9780**

Amount of Each Disbursement this Period

50.90

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31292.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I9781**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I9782**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I9783**

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2015

Transaction ID : **SB21B.I9784**

Amount of Each Disbursement this Period

50.90

B. TSYS MERCHANT SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 1601 DODGE ST

City OMAHA State NE Zip Code 68102-1637

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2015

Transaction ID : **SB21B.I9785**

Amount of Each Disbursement this Period

50.90

C. VULCAN MATERIALS COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 1200 URBAN CENTER DR.

City BIRMINGHAM State AL Zip Code 35242

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2015

Transaction ID : **SB21B.I9786**

Amount of Each Disbursement this Period

1854.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1955.80

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. YELLOWHAMMER MEDIA GROUP

Mailing Address 111 W 28TH STREET STE. 2B

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement
COMMUNICATIONS CONSULTING

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
01	/	29	/	2015

Transaction ID : SB21B.I9787

Amount of Each Disbursement this Period

9798.48

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
	/		/	

Amount of Each Disbursement this Period

--

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) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9798.48

692478.89

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF PAT TOOMEY

Mailing Address 5250 WHEATLAND DR

City ZIONSVILLE State PA Zip Code 18092

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

PATRICK JOSEPH TOOMEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2015

Transaction ID : SB23.I9597

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF PAT TOOMEY

Mailing Address 5250 WHEATLAND DR

City ZIONSVILLE State PA Zip Code 18092

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

PATRICK JOSEPH TOOMEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2015

Transaction ID : SB23.I9598

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN THUNE

Mailing Address 1911 W 57TH ST STE 102

City SIOUX FALL State SD Zip Code 57108

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JOHN THUNE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2015

Transaction ID : SB23.I9599

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

15000.00

TOTAL This Period (last page this line number only)..... ▶

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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 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN THUNE

Mailing Address 1911 W 57TH ST STE 102

City SIOUX FALL State SD Zip Code 57108

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JOHN THUNE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **SB23.I9600**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. RON JOHNSON FOR SENATE INC

Mailing Address 219 E. WASHINGTON AVE.
STE. 101

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

RONALD HAROLD JOHNSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **SB23.I9788**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RON JOHNSON FOR SENATE INC

Mailing Address 219 E. WASHINGTON AVE.
STE. 101

City OSHKOSH State WI Zip Code 54901

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

RONALD HAROLD JOHNSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **SB23.I9789**

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

15000.00

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. SHELBY FOR U S SENATE

Mailing Address PO BOX 1091

City TUSCALOOSA State AL Zip Code 35403

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

RICHARD C SHELBY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SB23.I9601

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SHELBY FOR U S SENATE

Mailing Address PO BOX 1091

City TUSCALOOSA State AL Zip Code 35403

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

RICHARD C SHELBY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SB23.I9602

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

TOTAL This Period (last page this line number only)..... ▶

40000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. MRS. WILLIAM H. CLARK

Mailing Address 3716 MAPLEWOOD AVE.

City DALLAS State TX Zip Code 75205

Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : SB28A.I9605

Amount of Each Disbursement this Period

4050.00

Full Name (Last, First, Middle Initial)

B. GUILLERMO DELAVINA

Mailing Address 13291 RALSTON AVE.

City SYLMAR State CA Zip Code 91342

Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : SB28A.I9604

Amount of Each Disbursement this Period

1560.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

5610.00

TOTAL This Period (last page this line number only)..... ▶

5610.00