



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Crowley Maritime Corporation Federal 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"/>		65621.80
(b) Cash on Hand at Beginning of Reporting Period.....	71824.24	
(c) Total Receipts (from Line 19) .....	3814.32	35677.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	75638.56	101298.86
7. Total Disbursements (from Line 31).....	2585.31	28245.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	73053.25	73053.25
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Crowley Maritime Corporation Federal PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3449.32	23881.92
(ii) Unitemized .....	365.00	11795.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3814.32	35677.06
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3814.32	35677.06
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3814.32	35677.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3814.32	35677.06

**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 .....	85.31	745.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	85.31	745.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	27500.00
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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2585.31	28245.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2585.31	28245.61

**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) .....	3814.32	35677.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3814.32	35677.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	85.31	745.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	85.31	745.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<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	

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)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Raymond Andersen</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 <b>Transaction ID : SA11AI.13004</b>
Mailing Address 8744 Rolling Brook Lane		Amount of Each Receipt this Period 30.00
City Jacksonville	State FL	Zip Code 32256
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Crowley Maritime Corporation	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B. John Azzo</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 <b>Transaction ID : SA11AI.13005</b>
Mailing Address P.O. Box 23894		Amount of Each Receipt this Period 60.00
City Jacksonville	State FL	Zip Code 32241
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Crowley Maritime Corporation	Occupation Director, Transportation & Equipment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C. Bradley Brown</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 <b>Transaction ID : SA11AI.13007</b>
Mailing Address 1237 Jean Court		Amount of Each Receipt this Period 50.00
City Jacksonville	State FL	Zip Code 32207
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Crowley Maritime Corporation	Occupation Director Strategic Projects and Innova	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Allen Busch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6560 NW 95th Lane  
 City Parkland State FL Zip Code 33076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vessel Management Services Inc Occupation Senior VP & General Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **800.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13008**  
 Amount of Each Receipt this Period **100.00**  
 Payroll Deduction

**B. Mr. John Calvin Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1925 Sevilla Boulevard, W.  
 City Atlantic Beach State FL Zip Code 32233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Senior Vice President & Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1200.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13009**  
 Amount of Each Receipt this Period **150.00**  
 Payroll Deduction

**C. James Chambers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 B Bayshore Drive  
 City Niceville State FL Zip Code 32578  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Director Marine Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13010**  
 Amount of Each Receipt this Period **30.00**  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>280.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Owen R Clarke**

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Staff

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.56**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13012**

Amount of Each Receipt this Period  
**83.32**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Mr. Steve Collar**

Mailing Address 17 Carlton Road

City Flanders State NJ Zip Code 07836

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

Name of Employer Vessel Management Services, In Occupation Vice President

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  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13013**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Coleman Cosgrove**

Mailing Address 12675 Ft. Caroline Rd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Vice President SSQE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13014**

Amount of Each Receipt this Period  
**80.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ► **213.32**

**TOTAL** This Period (last page this line 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 24  
(check only one)

<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)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Steve Demeroutis**

Mailing Address 1301 1st St. S.

City Jacksonville Beach	State FL	Zip Code 32250
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Vice President Labor Relations
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : SA11AI.13016**

Amount of Each Receipt this Period  

200.00
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Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Richard Dooley**

Mailing Address 4045 Old Mill Cove Trail W.

City Jacksonville	State FL	Zip Code 32277
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Director Insurance and Accounting Cont
--	--

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
08	/	31	/	2015

**Transaction ID : SA11AI.13017**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Lee Egland**

Mailing Address 9487 Regency Square Blvd

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Director, Labor Relations
--	---

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
08	/	31	/	2015

**Transaction ID : SA11AI.13019**

Amount of Each Receipt this Period  

50.00
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Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>280.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Crowley Maritime Corporation Federal PAC**

**A. Mr. Humberto Estevez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4806 Otter Creek Lane  
 City State Zip Code  
 Ponte Vedra Beach FL 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Crowley Liner Services, Inc. Vice President, Sales & Marketing  
 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  
 08 / 31 / 2015  
**Transaction ID : SA11AI.13020**  
 Amount of Each Receipt this Period  
 30.00  
 Payroll Deduction

**B. Eric Evans**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 St. Johns Forest Blvd.  
 City State Zip Code  
 St. Johns FL 32259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Crowley Maritime Corporation Vice President Finance & Planning  
 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  
 08 / 31 / 2015  
**Transaction ID : SA11AI.13021**  
 Amount of Each Receipt this Period  
 50.00  
 Payroll Deduction

**C. Bradford Fairgrieve**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4309 Rye Ct  
 City State Zip Code  
 Jacksonville FL 32259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Crowley Maritime Corporation Director, Claims  
 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  
 08 / 31 / 2015  
**Transaction ID : SA11AI.13022**  
 Amount of Each Receipt this Period  
 30.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ► 110.00  
**TOTAL** This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Mr. Steve Ficon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3226 Tabora Drive

City Antioch	State CA	Zip Code 94509
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Manager, Corporate Claims
--	---

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
08	/	31	/	2015

**Transaction ID : SA11AI.13023**

Amount of Each Receipt this Period  

30.00
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Payroll Deduction

**B. Carl Fox**  
Full Name (Last, First, Middle Initial)  
Mailing Address 501 Cane Mill Court

City Ponte Vedra Beach	State FL	Zip Code 32082
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Director of Marketing
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : SA11AI.13024**

Amount of Each Receipt this Period  

100.00
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Payroll Deduction

**C. Michael Golonka**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5732 Clifton Avenue

City Jacksonville	State FL	Zip Code 32211
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation General Manager
--	-------------------------------

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
08	/	31	/	2015

**Transaction ID : SA11AI.13026**

Amount of Each Receipt this Period  

30.00
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Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Robert Grune**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6576 163rd Place, SE  
 City Bellevue State WA Zip Code 98006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Liner Services Inc. Occupation Senior VP & General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13027**  
 Amount of Each Receipt this Period 100.00  
 Payroll Deduction

**B. David Holden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 South Hampton Club Way  
 City St. Augustine State FL Zip Code 32092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Director HR Technology and Admin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13029**  
 Amount of Each Receipt this Period 60.00  
 Payroll Deduction

**C. Mr. John Hourihan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12534 Mission Hills Circle, S  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Liner Services, Inc. Occupation Senior Vice President & General Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13031**  
 Amount of Each Receipt this Period 200.00  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Edward R LaGoy**

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Employee

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13037**

Amount of Each Receipt this Period  
**90.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Mr. Arthur La Moureaux**

Mailing Address 14210 Saybrook Falls Court

City Jacksonville State FL Zip Code 32224

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

Name of Employer Crowley Maritime Corporation Occupation Director, Internal Audit

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13036**

Amount of Each Receipt this Period  
**60.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Francis Larkin**

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Employee

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **672.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13038**

Amount of Each Receipt this Period  
**84.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **234.00**

**TOTAL** This Period (last page this line 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 14 OF 24  
(check only one)

<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)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Dominic LaSenna**

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Director Operations Integrity

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  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13039**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Bryan Lee**

Mailing Address 1626 Hawks Nest Drive

City Orange Park State FL Zip Code 32003

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

Name of Employer Crowley Maritime Corporation Occupation Vice President HR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13041**

Amount of Each Receipt this Period  
**60.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Robert Lee**

Mailing Address 9116 Carbondale Drive E

City Jacksonville State FL Zip Code 32208

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

Name of Employer Crowley Maritime Corporation Occupation Director, Finance and Planning

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  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13042**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **120.00**

**TOTAL** This Period (last page this line 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 15 OF 24  
(check only one)

<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)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Laurie Luke**

Mailing Address 12288 Woodstone Terrace

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Director, Risk Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 31 / 2015**  
Transaction ID : **SA11AI.13045**

Amount of Each Receipt this Period **42.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Wendy Mac Donald**

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Vice President Procurement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 31 / 2015**  
Transaction ID : **SA11AI.13046**

Amount of Each Receipt this Period **50.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Mr. Arthur Mead III**

Mailing Address 10 Hopson Road

City Jacksonville Beach State FL Zip Code 32250

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

Name of Employer Crowley Maritime Corporation Occupation Senior Vice President and General Coun

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2015**  
Transaction ID : **SA11AI.13047**

Amount of Each Receipt this Period **30.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **122.00**

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

**SCHEDULE A (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 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. William Metcalf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9487 Regency Square Blvd  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Director, Engineering  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13048**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction

**B. Susan Michel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21010 N. e. 108th St,  
 City Redmond State WA Zip Code 98053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Director People Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13049**  
 Amount of Each Receipt this Period **30.00**  
 Payroll Deduction

**C. Patrick Mullins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1853 Oakbreeze Court  
 City Jacksonville Beach State FL Zip Code 32250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Director Equipment Control  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13051**  
 Amount of Each Receipt this Period **60.00**  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... **140.00**  
**TOTAL** This Period (last page this line 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 24  
(check only one)

<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Mr. Charles Nalen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 34123 Hood Canal Drive  
City Kingston State WA Zip Code 98346  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Crowley Maritime Corporation Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13052**  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**B. David W. Nickless**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4436 Rock Creek Circle  
City Jacksonville State FL Zip Code 32246  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Crowley Maritime Corporation Occupation Director Business Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13053**  
Amount of Each Receipt this Period 40.00  
Payroll Deduction

**C. Mr. Nicholas Orfanidis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23 Newport Drive  
City Manalapan State NJ Zip Code 07726-4530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Marine Transport Management Occupation Director, Fleet Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : SA11AI.13055**  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (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 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Tony Otero**  
Full Name (Last, First, Middle Initial)

Mailing Address 7976 Pine Lake Rd

City Jacksonville State FL Zip Code 32256

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

Name of Employer Crowley Maritime Corporation Occupation Vice President and GM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11Al.13056**

Amount of Each Receipt this Period **50.00**

Payroll Deduction

**B. Mr. William Pennella**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 Heritage Oak Court

City Alamo State CA Zip Code 94507

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

Name of Employer Crowley Maritime Corporation Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11Al.13057**

Amount of Each Receipt this Period **250.00**

Payroll Deduction

**C. Timothy Quirk**  
Full Name (Last, First, Middle Initial)

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Director Pricing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11Al.13058**

Amount of Each Receipt this Period **30.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **330.00**

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

**SCHEDULE A (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 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Michael G. Roberts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9487 Regency Square Boulevard  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Senior Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3200.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13059**  
 Amount of Each Receipt this Period **400.00**  
 Payroll Deduction

**B. Ms. Susan Rodgers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 144 Laural Lane  
 City Ponte Vedra Beach State FL Zip Code 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Senior Vice President, Administration  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13060**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction

**C. Julia Shemesh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7720 A Island View Court  
 City Mukilteo State WA Zip Code 98275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crowley Maritime Corporation Occupation Senior Corporate Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **800.00**

Date of Receipt **08 / 31 / 2015**  
**Transaction ID : SA11AI.13062**  
 Amount of Each Receipt this Period **100.00**  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Mr. Rockwell Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 80 Prospect Terracce

City Tenafly State NJ Zip Code 07670

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

Name of Employer Marine Transport Management Occupation Senior Vice President and General Mana

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11AI.13064**

Amount of Each Receipt this Period **80.00**

Payroll Deduction

**B. Jeffrey Steighner**  
Full Name (Last, First, Middle Initial)

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Director Customer Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11AI.13065**

Amount of Each Receipt this Period **50.00**

Payroll Deduction

**C. Mr. Alexander Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 607

City Valdez State AK Zip Code 99686

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

Name of Employer Crowley Marine Services, Inc. Occupation Vice President, Marine Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 31 / 2015**

**Transaction ID : SA11AI.13066**

Amount of Each Receipt this Period **50.00**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **180.00**

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

**SCHEDULE A (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 24
	<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)  
**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Ching-Lu Teng**

Mailing Address 416-245th Ave SE

City Sammamish	State WA	Zip Code 98074
-------------------	-------------	-------------------

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

Name of Employer Crowley Maritime Corporation	Occupation Director Business Development
--	---

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  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13067**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Alan Traits**

Mailing Address 9487 Regency Square Blvd

City Jacksonville	State FL	Zip Code 32225
----------------------	-------------	-------------------

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

Name of Employer Crowley Maritime Corporation	Occupation Attorney
--	------------------------

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  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13069**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Mr. Daniel L. Warner**

Mailing Address 280 Cedar Street

City Neptune Beach	State FL	Zip Code 32266
-----------------------	-------------	-------------------

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

Name of Employer Crowley Maritime Corporation	Occupation Senior VP and Treasurer
--	---------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : SA11AI.13071**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 24  
(check only one)

<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Robert Weist**  
Full Name (Last, First, Middle Initial)

Mailing Address 588 Battersea Drive

City St. Augustine State FL Zip Code 32095

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

Name of Employer Crowley Maritime Corporation Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015  
**Transaction ID : SA11AI.13072**

Amount of Each Receipt this Period  
30.00

Payroll Deduction

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3449.32

**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

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)

**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address 1 Independent Drive

City Jacksonville State FL Zip Code 32202

Purpose of Disbursement  
Bank Charge

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 Y Y  
08 / 11 / 2015

**Transaction ID : SB21B.13076**

Amount of Each Disbursement this Period

85.31

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 / 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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

85.31

85.31

**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)

**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MAZIE HIRONO**

Mailing Address 236 Massachusetts Avenue NE  
#202

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Political Contribution

Candidate Name

**FRIENDS OF MAZIE HIRONO**

Office Sought:  House  
 Senate  
 President  
State: HI District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 28 / 2015

**Transaction ID : SB23.13074**

Amount of Each Disbursement this Period

2500.00

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 / 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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2500.00

2500.00