

# 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

KEEP THE PROMISE I

ADDRESS (number and street) 2 ROOSEVELT AVENUE

Check if different than previously reported. (ACC) PORT JEFFERSON STA NY 11776

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

C C00575373 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20 (M2) [X], Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), 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 01/01/2016 through 01/31/2016

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 JACQUELYN JAMES

Signature of Treasurer JACQUELYN JAMES [Electronically Filed] Date 05/31/2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**KEEP THE PROMISE I**

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="2016"/>		<input type="text" value="7494987.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7494987.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15705.21"/>	<input type="text" value="15705.21"/>
(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="7510692.90"/>	<input type="text" value="7510692.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4764783.48"/>	<input type="text" value="4764783.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2745909.42"/>	<input type="text" value="2745909.42"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="15067.04"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

KEEP THE PROMISE I

Report Covering the Period: From: 01 / 01 / 2016 To: 01 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15705.21	15705.21
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))..... ▶	15705.21	15705.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15705.21	15705.21

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	4501538.53	4501538.53
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 .....	263244.95	263244.95
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)) ..	4764783.48	4764783.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4764783.48	4764783.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 57  
(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)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)  
**A. CHASE BANK**

Mailing Address PO BOX 65974

City State Zip Code  
SAN ANTONIO TX 78265

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.21

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016  
**Transaction ID : SA17.5186**

Amount of Each Receipt this Period  
305.21

Memo Item  
INTEREST INCOME

Full Name (Last, First, Middle Initial)  
**B. GLENN COOK**

Mailing Address 264 CRYSTAL SPRINGS ROAD

City State Zip Code  
SAINT HELENA CA 94574

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

Name of Employer Occupation  
SELF EMPLOYED WINERY OWNER

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  
 01 / 22 / 2016  
**Transaction ID : SA17.5166**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JAMES DOOLEY**

Mailing Address 17 REDFERN COURT

City State Zip Code  
LINCROFT NJ 07738

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

Name of Employer Occupation  
STONE HARBOR MANAGER

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  
 01 / 26 / 2016  
**Transaction ID : SA17.5170**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1305.21

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

**SCHEDULE A (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 57
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

**A. RALPH FITE**  
Full Name (Last, First, Middle Initial)

Mailing Address 10222 DEL MONTE DRIVE

City HOUSTON State TX Zip Code 77042

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

Name of Employer WELCOME GROUP LLC Occupation DIRECTOR OF 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  
 01 / 20 / 2016

**Transaction ID : SA17.5164**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

**B. KENT JORIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 349 CHILEAN AVENUE

City PALM BEACH State FL Zip Code 33480

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 ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2016

**Transaction ID : SA17.5158**

Amount of Each Receipt this Period  
 10000.00

Memo Item  
 CONTRIBUTION

**C. THE MONACO GROUP**  
Full Name (Last, First, Middle Initial)

Mailing Address 1011 S. LINWOOD AVENUE

City SANTA ANA State CA Zip Code 92705

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 / D D / Y Y Y Y Y Y  
 01 / 31 / 2016

**Transaction ID : SA17.5203**

Amount of Each Receipt this Period  
 4000.00

Memo Item  
 OFFSET FROM PREVIOUS PERIOD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14250.00
<b>TOTAL</b> This Period (last page this line number only).....	15555.21

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 84314

City State Zip Code  
BATON ROUGE LA 70884

Purpose of Disbursement  
CREDIT CARD 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 / 29 / 2016

Transaction ID : SB29.5187

Amount of Each Disbursement this Period

447.28

Memo Item

Full Name (Last, First, Middle Initial)

**B. ASE GROUP INC**

Mailing Address 6600 COLLEGE BLVD  
STE 310

City State Zip Code  
OVERLAND KS 66211

Purpose of Disbursement  
CAUCUS EVENT MANAGEMENT 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  
01 / 29 / 2016

Transaction ID : SB29.5127

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BRACEWELL & GIULIANI LLP**

Mailing Address PO BOX 848566

City State Zip Code  
DALLAS TX 75284

Purpose of Disbursement  
LEGAL & COMPLIANCE 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  
01 / 31 / 2016

Transaction ID : SB29.5128

Amount of Each Disbursement this Period

29788.07

Memo Item

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

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

37735.35



**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. BREITBART NEWS NETWORK LLC**

Mailing Address 8363 WILSHIRE BLVD  
STE 1000

City BEVERLY HILLS State CA Zip Code 90211

Purpose of Disbursement  
MEDIA - PREPAID

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5174**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMBRIDGE ANALYTICA LLC**

Mailing Address 8383 WILSHIRE BLVD  
STE 1000

City BEVERLY HILLS State CA Zip Code 90211

Purpose of Disbursement  
MEDIA PREPAID

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5195**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address PO BOX 20706

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

/  /

Transaction ID : **SB29.5145**

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. DENTONS US LLP**

Mailing Address 1301 K ST NW  
STE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5150**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SHAWN DIETZ**

Mailing Address 720 CENTRAL AVENUE EAST

City HAMPTON State IA Zip Code 50441

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5133**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. GLITTERING STEEL LLC**

Mailing Address 8383 WILSHIRE BLVD  
STE 1000

City BEVERLY HILLS State CA Zip Code 90211

Purpose of Disbursement  
VIDEO PRODUCTION - NOT IE RELATED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5729**

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial) <b>A. GLITTERING STEEL LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000		<b>Transaction ID : SB29.5196</b>
City BEVERLY HILLS State CA Zip Code 90211	Amount of Each Disbursement this Period 20250.00	
Purpose of Disbursement VIDEO PRODUCTION - PRE PAID	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KRISTINA HERNANDEZ</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2016
Mailing Address 332 CRESTHAVEN PLACE		<b>Transaction ID : SB29.5132</b>
City SIMPSONVILLE State SC Zip Code 29681	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement MEDIA CONSULTING	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. INSOURCECODE LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 8606 ALLISONVILLE ROAD STE 260		<b>Transaction ID : SB29.5136</b>
City INDIANAPOLIS State IN Zip Code 46250	Amount of Each Disbursement this Period 499.00	
Purpose of Disbursement WEB SERVICES	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25749.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. JEFF KING**

Mailing Address 508 CENTER ST

City WALL LAKE State IA Zip Code 51466

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.5131**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ERIK LARSEN**

Mailing Address 2210 NEBRASKA STREET

City SIOUX CITY State IA Zip Code 51104

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.5130**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAIL CHIMP**

Mailing Address 675 PONCE DE LEON AVE NE  
STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement  
WEB SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.5137**

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 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 checked="" 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)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. TIM OVERLIN**

Mailing Address 1440 41ST PLACE

City DES MOINES State IA Zip Code 50311

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : **SB29.5151**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. JUDD SAUL**

Mailing Address 1801 DONALD DRIVE

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : **SB29.5152**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAD STEENHOEK**

Mailing Address 3892 N. 500TH AVENUE

City AMES State IA Zip Code 50014

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : **SB29.5129**

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. THE POLLING COMPANY**

Mailing Address 400 NORTH CAPITOL STREET NW  
STE 790

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
SURVEY RESEARCH SVCS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5135**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET

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 : **SB29.5147**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. VOCUS**

Mailing Address 12051 INDIAN CREEK COURT

City BELTSVILLE State MD Zip Code 20705

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB29.5134**

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

Full Name (Last, First, Middle Initial)

**A. MELINDA WADSLEY**

Mailing Address 1247 OLD BLOOMINGTON ROAD

City State Zip Code  
AMES IA 50010

Purpose of Disbursement  
VOTER CONTACT SERVICES/MILEAGE

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  
01 / 31 / 2016

Transaction ID : SB29.5154

Amount of Each Disbursement this Period

4733.19

Memo Item

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

Memo Item

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

Memo Item

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

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

4733.19

262978.99

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**KEEP THE PROMISE I**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>THE LUKENS COMPANY</b>	Nature of Debt (Purpose): DIRECT MAIL EXPENSE
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5201</b>	
Amount Incurred This Period <input type="text" value="11067.04"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11067.04"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>THE MONACO GROUP</b>	Nature of Debt (Purpose): DIRECT MAIL EXPENSE - DISPUTED
Mailing Address 1011 S. LINWOOD AVENUE	
City State Zip Code SANTA ANA CA 92705	

Outstanding Balance Beginning This Period <input type="text" value="4000.00"/>	<b>Transaction ID : SD10.5037</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="15067.04"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="15067.04"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="15067.04"/>



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>BREITBART NEWS NETWORK LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Mailing Address 8363 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">7000.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure MEDIA	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 27 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2213194.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>BREITBART NEWS NETWORK LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Mailing Address 8363 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">3000.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure MEDIA	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARCO RUBIO	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 27 / 2016
Name of Federal Candidate MARCO RUBIO	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2216194.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">10000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2016

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 912883.28
Date of Public Distribution/Dissemination 01/18/2016
Amount 5000.00
Transaction ID : SE.4486
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 317401.43
Date of Public Distribution/Dissemination 01/18/2016
Amount 6000.00
Transaction ID : SE.4495
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 11000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature JACQUELYN JAMES Date 05/31/2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">918.00</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4507</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate MARCO RUBIO	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">918217.28</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">6252.00</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4508</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">919135.28</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">6252.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
--	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">10255.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure MEDIA	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARCO RUBIO	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Name of Federal Candidate MARCO RUBIO	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">327656.43</span>	

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">63.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure MEDIA	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">327719.43</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">10318.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b>	<input type="checkbox"/> Memo Item
Mailing Address 8383 WILSHIRE BLVD STE 1000	Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 20 / 2016</b>
City State Zip Code <b>BEVERLY HILLS CA 90211</b>	Amount <b>2306.00</b>
Purpose of Expenditure <b>MEDIA</b>	Category/Type
Name of Federal Candidate <b>MARCO RUBIO</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President    District: <u>00</u> State: <u>IA</u>
<b>921441.28</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General    2016 <input type="checkbox"/> Other (specify) ▶

Transaction ID : **SE.4517**

Date of Disbursement or Obligation

MM / DD / YYYY  
**01 / 14 / 2016**

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b>	<input type="checkbox"/> Memo Item
Mailing Address 8383 WILSHIRE BLVD STE 1000	Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 20 / 2016</b>
City State Zip Code <b>BEVERLY HILLS CA 90211</b>	Amount <b>899.00</b>
Purpose of Expenditure <b>MEDIA</b>	Category/Type
Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President    District: <u>00</u> State: <u>IA</u>
<b>922340.28</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General    2016 <input type="checkbox"/> Other (specify) ▶

Transaction ID : **SE.4518**

Date of Disbursement or Obligation

MM / DD / YYYY  
**01 / 14 / 2016**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>3205.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES*

Signature \_\_\_\_\_ [Electronically Filed] Date **05 / 31 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 331938.43
Date of Public Distribution/Dissemination 01/20/2016
Amount 4219.00
Transaction ID : SE.4519
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 332048.43
Date of Public Distribution/Dissemination 01/20/2016
Amount 110.00
Transaction ID : SE.4520
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 4329.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 923840.28
Date of Public Distribution/Dissemination 01/21/2016
Amount 1500.00
Transaction ID : SE.4527
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 334370.43
Date of Public Distribution/Dissemination 01/21/2016
Amount 2322.00
Transaction ID : SE.4529
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 3822.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 930110.02
Date of Public Distribution/Dissemination 01/22/2016
Amount 6269.74
Transaction ID: SE.4533
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 347239.23
Date of Public Distribution/Dissemination 01/22/2016
Amount 12868.80
Transaction ID: SE.4536
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 19138.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 347415.14
Date of Public Distribution/Dissemination 01/22/2016
Amount 175.91
Transaction ID : SE.4537
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 930468.02
Date of Public Distribution/Dissemination 01/30/2016
Amount 358.00
Transaction ID : SE.5049
Date of Disbursement or Obligation 01/14/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 533.91
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
--	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 30 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Amount <span style="border: 1px solid black; padding: 2px;">1015.00</span>	
City BEVERLY HILLS	State CA	Zip Code 90211	<b>Transaction ID : SE.5050</b>
Purpose of Expenditure MEDIA	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">348430.14</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 31 / 2016	
Mailing Address 8383 WILSHIRE BLVD STE 1000		Amount <span style="border: 1px solid black; padding: 2px;">418.00</span>	
City BEVERLY HILLS	State CA	Zip Code 90211	<b>Transaction ID : SE.5055</b>
Purpose of Expenditure MEDIA	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">930886.02</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1433.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 932110.02

Date of Public Distribution/Dissemination 02 / 01 / 2016
Amount 1224.00
Transaction ID : SE.5065
Date of Disbursement or Obligation 01 / 14 / 2016
Office Sought: House District: 00
President Senate State: IA
Disbursement For: Primary General
Other (specify)

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 349445.14

Date of Public Distribution/Dissemination 02 / 01 / 2016
Amount 1015.00
Transaction ID : SE.5068
Date of Disbursement or Obligation 01 / 14 / 2016
Office Sought: House District: 00
President Senate State: SC
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2239.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
JACQUELYN JAMES [Electronically Filed] Date 05 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA Category/Type

Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 838.00
Transaction ID : SE.5071
Date of Disbursement or Obligation 01 / 14 / 2016

Name of Federal Candidate DONALD J TRUMP
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 350283.14

Office Sought: House District: 00
President Senate State: SC
Disbursement For: Primary General
Other (specify)

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA Category/Type

Date of Public Distribution/Dissemination 02 / 03 / 2016
Amount 855.00
Transaction ID : SE.5074
Date of Disbursement or Obligation 01 / 14 / 2016

Name of Federal Candidate DONALD J TRUMP
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 351138.14

Office Sought: House District: 00
President Senate State: SC
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1693.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA Category/Type

Date of Public Distribution/Dissemination 02 / 04 / 2016
Amount 69.00
Transaction ID : SE.5077
Date of Disbursement or Obligation 01 / 14 / 2016

Name of Federal Candidate DONALD J TRUMP
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 351207.14

Office Sought: House District: 00
President Senate State: SC
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee CAMBRIDGE ANALYTICA LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure MEDIA Category/Type

Date of Public Distribution/Dissemination 02 / 08 / 2016
Amount 324.00
Transaction ID : SE.5099
Date of Disbursement or Obligation 01 / 14 / 2016

Name of Federal Candidate MARCO RUBIO
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 78344.89

Office Sought: House District: 00
President Senate State: NH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 393.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05 / 31 / 2016
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAMBRIDGE ANALYTICA LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 09 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">175.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure MEDIA	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARCO RUBIO	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Name of Federal Candidate MARCO RUBIO	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">78519.89</span>	

Full Name of Payee <b>GLITTERING STEEL LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">4375.00</span>
City State Zip Code BEVERLY HILLS CA 90211	
Purpose of Expenditure VIDEO PRODUCTION	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARCO RUBIO	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2016
Name of Federal Candidate MARCO RUBIO	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">712304.00</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">4550.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee GLITTERING STEEL LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure VIDEO PRODUCTION
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 4375.00

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 4375.00
Transaction ID : SE.4383
Date of Disbursement or Obligation 01 / 06 / 2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee GLITTERING STEEL LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure VIDEO PRODUCTION
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 4375.00

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 4375.00
Transaction ID : SE.4384
Date of Disbursement or Obligation 01 / 06 / 2016
Office Sought: President
Disbursement For: Primary

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 8750.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee GLITTERING STEEL LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure VIDEO PRODUCTION
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 4375.00

Date of Public Distribution/Dissemination 01 / 04 / 2016
Amount 4375.00
Transaction ID : SE.4385
Date of Disbursement or Obligation 01 / 06 / 2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee GLITTERING STEEL LLC
Mailing Address 8383 WILSHIRE BLVD STE 1000
City BEVERLY HILLS State CA Zip Code 90211
Purpose of Expenditure VIDEO PRODUCTION
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 809549.46

Date of Public Distribution/Dissemination 01 / 14 / 2016
Amount 6885.00
Transaction ID : SE.4502
Date of Disbursement or Obligation 01 / 12 / 2016
Office Sought: President
Disbursement For: Primary

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 11260.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05 / 31 / 2016
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>GLITTERING STEEL LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">13567.50</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4557</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure VIDEO PRODUCTION Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate DONALD J TRUMP	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2199511.85</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>GLITTERING STEEL LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">6682.50</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4559</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure VIDEO PRODUCTION Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2206194.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">20250.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>GLITTERING STEEL LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">10100.00</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4566</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure VIDEO PRODUCTION Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1979991.40</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>GLITTERING STEEL LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 8383 WILSHIRE BLVD STE 1000	Amount <span style="border: 1px solid black; padding: 2px;">15150.00</span>
City State Zip Code BEVERLY HILLS CA 90211	<b>Transaction ID : SE.4568</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure VIDEO PRODUCTION Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1995141.40</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">25250.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">566343.20</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.4368</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 01 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">566343.20</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">141585.80</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.4395</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 01 / 01 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">707929.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">707929.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Office Sought: President
Disbursement For: Primary
Amount 98333.82
Transaction ID: SE.4446
Date of Disbursement or Obligation 01/14/2016

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Office Sought: President
Disbursement For: Primary
Amount 22143.07
Transaction ID: SE.4447
Date of Disbursement or Obligation 01/14/2016

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures 120476.89. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (c) TOTAL Independent Expenditures.

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 18 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">51502.82</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.4451</b>
Purpose of Expenditure MEDIA Category/Type: <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">78020.89</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 18 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">51502.82</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.4455</b>
Purpose of Expenditure MEDIA Category/Type: <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">55877.82</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">103005.64</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575373	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b>		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282			
City PLANO	State TX	Zip Code 75023	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		78020.89	

Date of Public Distribution/Dissemination 01 / 18 / 2016
Amount 22143.07
Transaction ID : SE.4456
Date of Disbursement or Obligation 01 / 14 / 2016
Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b>		<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282			
City PLANO	State TX	Zip Code 75023	
Purpose of Expenditure MEDIA		Category/Type	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		269258.36	

Date of Public Distribution/Dissemination 01 / 18 / 2016
Amount 98333.82
Transaction ID : SE.4459
Date of Disbursement or Obligation 01 / 14 / 2016
Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	120476.89
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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JACQUELYN JAMES

[Electronically Filed]

Signature

Date

05 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 18 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">42143.07</span>
City State Zip Code PLANO TX 75023	<b>Transaction ID : SE.4460</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">311401.43</span>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 01 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">279288.00</span>
City State Zip Code PLANO TX 75023	<b>Transaction ID : SE.5079</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">630495.14</span>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">321431.07</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5079

Advertising period extended; corrected total to disclose final expense.

Form/Schedule:

Transaction ID:



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 01 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">209466.00</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5080</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">839961.14</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 01 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">209466.00</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5081</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1049427.14</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">418932.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5080

Advertising period extended; corrected total to disclose final expense.

Form/Schedule: SE

Transaction ID: SE.5081

Advertising period extended; corrected total to disclose final expense.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 08 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">87291.00</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5092</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1136718.14</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 08 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">87291.00</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5093</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1224009.14</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">174582.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>		FEC IDENTIFICATION NUMBER ▼ <b>C C00575373</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>RIGEL STRATEGIES LLC</b>	<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		
City <b>PLANO</b>	State <b>TX</b>	Zip Code <b>75023</b>
Purpose of Expenditure <b>MEDIA</b>	Category/ Type	

Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 08 / 2016</b>
Amount <b>116388.00</b>
Transaction ID : <b>SE.5094</b>
Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 14 / 2016</b>

Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>00</u> State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought	<b>1340397.14</b>

Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
--

Full Name of Payee <b>RIGEL STRATEGIES LLC</b>	<input type="checkbox"/> Memo Item	
Mailing Address 3948 LEGACY DRIVE STE 106-282		
City <b>PLANO</b>	State <b>TX</b>	Zip Code <b>75023</b>
Purpose of Expenditure <b>MEDIA</b>	Category/ Type	

Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 18 / 2016</b>
Amount <b>42143.07</b>
Transaction ID : <b>SE.5204</b>
Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 14 / 2016</b>

Name of Federal Candidate <b>MARCO RUBIO</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>00</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	<b>974253.09</b>

Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
--

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>158531.07</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: JACQUELYN JAMES [Electronically Filed] Date: **05 / 31 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">13333.33</span>
City PLANO State TX Zip Code 75023	<b>Transaction ID : SE.5250</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13333.33</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">13333.33</span>
City PLANO State TX Zip Code 75023	<b>Transaction ID : SE.5251</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13333.33</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">26666.66</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">13333.34</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5252</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13333.34</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">31220.67</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5257</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">44554.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">44554.01</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">31220.67</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5258</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">44554.00</span>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RIGEL STRATEGIES LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 24 / 2016
Mailing Address 3948 LEGACY DRIVE STE 106-282	Amount <span style="border: 1px solid black; padding: 2px;">31220.66</span>
City: PLANO State: TX Zip Code: 75023	<b>Transaction ID : SE.5259</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 14 / 2016
Purpose of Expenditure MEDIA Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">44554.00</span>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">62441.33</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1700802.35
Date of Public Distribution/Dissemination 01/18/2016
Amount 598645.00
Transaction ID: SE.4488
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1839607.61
Date of Public Distribution/Dissemination 01/25/2016
Amount 138805.26
Transaction ID: SE.4552
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 737450.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature JACQUELYN JAMES [Electronically Filed] Date 05/31/2016



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 2121424.35
Date of Public Distribution/Dissemination 01/25/2016
Amount 281816.74
Transaction ID : SE.4554
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 1522909.40
Date of Public Distribution/Dissemination 01/25/2016
Amount 115708.00
Transaction ID : SE.4561
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 397524.74
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature JACQUELYN JAMES [Electronically Filed] Date 05/31/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1696471.40
Date of Public Distribution/Dissemination 01/25/2016
Amount 173562.00
Transaction ID: SE.4564
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 2135244.35
Date of Public Distribution/Dissemination 02/01/2016
Amount 13820.00
Transaction ID: SE.5060
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 187382.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1805839.40
Date of Public Distribution/Dissemination 02/17/2016
Amount 109368.00
Transaction ID: SE.5175
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate MARCO RUBIO
Calendar Year-To-Date Per Election for Office Sought 1887865.40
Date of Public Distribution/Dissemination 02/17/2016
Amount 82026.00
Transaction ID: SE.5177
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 191394.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RIGEL STRATEGIES LLC
Mailing Address 3948 LEGACY DRIVE STE 106-282
City PLANO State TX Zip Code 75023
Purpose of Expenditure MEDIA
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 1969891.40
Date of Public Distribution/Dissemination 02/17/2016
Amount 82026.00
Transaction ID: SE.5178
Date of Disbursement or Obligation 01/19/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee THE LUKENS COMPANY
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR
City ARLINGTON State VA Zip Code 22206
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 757840.96
Date of Public Distribution/Dissemination 01/19/2016
Amount 45536.96
Transaction ID: SE.4490
Date of Disbursement or Obligation 01/08/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 127562.96
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>THE LUKENS COMPANY</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Amount <span style="border: 1px solid black; padding: 2px;">44823.50</span>
City State Zip Code ARLINGTON VA 22206	<b>Transaction ID : SE.4491</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 08 / 2016
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">802664.46</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE LUKENS COMPANY</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Amount <span style="border: 1px solid black; padding: 2px;">83298.04</span>
City State Zip Code ARLINGTON VA 22206	<b>Transaction ID : SE.4497</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 08 / 2016
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">87673.04</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">128121.54</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>THE LUKENS COMPANY</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Amount <span style="border: 1px solid black; padding: 2px;">83251.50</span>
City State Zip Code ARLINGTON VA 22206	<b>Transaction ID : SE.4499</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 08 / 2016
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">170924.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE LUKENS COMPANY</b> <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Amount <span style="border: 1px solid black; padding: 2px;">5533.52</span>
City State Zip Code ARLINGTON VA 22206	<b>Transaction ID : SE.5200</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 08 / 2016
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">170924.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">83251.50</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00575373
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>THE LUKENS COMPANY</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016	
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR		Amount <span style="border: 1px solid black; padding: 2px;">5533.52</span>	
City ARLINGTON	State VA	Zip Code 22206	<b>Transaction ID : SE.5202</b>
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 08 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">170924.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THE LUKENS COMPANY</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 23 / 2016	
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR		Amount <span style="border: 1px solid black; padding: 2px;">66804.26</span>	
City ARLINGTON	State VA	Zip Code 22206	<b>Transaction ID : SE.4541</b>
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 15 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">1041057.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">66804.26</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*JACQUELYN JAMES* [Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I
FEC IDENTIFICATION NUMBER C C00575373
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THE LUKENS COMPANY
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR
City ARLINGTON State VA Zip Code 22206
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1102157.35
Date of Public Distribution/Dissemination 01/23/2016
Amount 61100.00
Transaction ID : SE.4542
Date of Disbursement or Obligation 01/15/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee THE LUKENS COMPANY
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR
City ARLINGTON State VA Zip Code 22206
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date Per Election for Office Sought 1407201.40
Date of Public Distribution/Dissemination 01/23/2016
Amount 66804.26
Transaction ID : SE.4549
Date of Disbursement or Obligation 01/15/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 127904.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
JACQUELYN JAMES [Electronically Filed] Date 05/31/2016
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KEEP THE PROMISE I</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00575373
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>THE LUKENS COMPANY</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 23 / 2016
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Amount <span style="border: 1px solid black; padding: 2px;">50700.00</span>
City State Zip Code ARLINGTON VA 22206	<b>Transaction ID : SE.4543</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 21 / 2016
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2185944.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address	Amount <span style="border: 1px solid black; padding: 2px;"> </span>
City State Zip Code	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">50700.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">4501538.53</span>

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*JACQUELYN JAMES* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Signature