

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**
CMR Political Action Committee

ADDRESS (number and street) PO Box 2485
Check if different than previously reported. (ACC) Springfield VA 22152

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00469429 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Carlin, Robert, F., ,
Type or Print Name of Treasurer

Signature of Treasurer Carlin, Robert, F., , [Electronically Filed] Date 07 / 31 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CMR Political Action Committee

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="2017"/>		<input type="text" value="18276.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18276.54"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="256707.73"/>	<input type="text" value="256707.73"/>
(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="274984.27"/>	<input type="text" value="274984.27"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="213485.01"/>	<input type="text" value="213485.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61499.26"/>	<input type="text" value="61499.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CMR Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27500.00	27500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27500.00	27500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	160500.00	160500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	188000.00	188000.00
12. Transfers From Affiliated/Other Party Committees.....	65916.48	65916.48
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).....	291.25	291.25
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	256707.73	256707.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	256707.73	256707.73

DETAILED SUMMARY PAGE

of Disbursements

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	18985.01	18985.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18985.01	18985.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	192000.00	192000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	2500.00	2500.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	213485.01	213485.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	213485.01	213485.01

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	188000.00	188000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	188000.00	188000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	18985.01	18985.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	291.25	291.25
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18693.76	18693.76

**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 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. ADAMS, C. DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 VILLA ROAD
 City GREENVILLE State SC Zip Code 29615-3052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE CAPITAL CORPORATION Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2017
Transaction ID : SA11A.39586
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. COWLES, JAMES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2506 S BOXWOOD LN
 City SPOKANE State WA Zip Code 99223-4938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INLAND EMPIRE PAPER Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2017
Transaction ID : SA11A.39582
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. FAISON, JAY, WINTERS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 GREENWOOD CLFS STE 301
 City CHARLOTTE State NC Zip Code 28204-2981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLEARPATH FOUNDATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : SA11A.40590
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. HIRSCHMANN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4052 SEMINARY RD
 City ALEXANDRIA State VA Zip Code 22304-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS & JENSEN Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 18 / 2017
Transaction ID : SA11A.41550
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. MACKINNON, JEFFREY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3753 OLIVER STREET NW
 City WASHINGTON State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARRAGUT PARTNERS Occupation (for Individual) PRINCIPAL & CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11A.42006
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

C. MARCHESI, JAMES, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4755 CLAY PEAK DRIVE
 City LAS VEGAS State NV Zip Code 89129-2222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUHAYE PEAK INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 12 / 2017
Transaction ID : SA11A.39585
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 8 OF 64
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WHITNEY, ELIZABETH, K., ,

Mailing Address 138 MARTIN LANE

City ALEXANDRIA	State VA	Zip Code 22304-7749
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEGUIRE WHITNEY, LLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2017

Transaction ID : SA11A.41446

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	27500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1891 PRESTON WHITE DRIVE
 City RESTON State VA Zip Code 20191-4326
 FEC ID number of contributing federal political committee. **C** C00343459
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 29 / 2017**
Transaction ID : SA11C.42014
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. AMERICAN HOSPITAL ASSOCIATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7TH STREET NW SUITE 700
 City WASHINGTON State DC Zip Code 20004-2801
 FEC ID number of contributing federal political committee. **C** C00106146
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **01 / 30 / 2017**
Transaction ID : SA11C.39583
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 MASSACHUSETTS AVENUE NW SUITE 600
 City WASHINGTON State DC Zip Code 20001-7400
 FEC ID number of contributing federal political committee. **C** C00000422
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 21 / 2017**
Transaction ID : SA11C.39577
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2017

Transaction ID : SA11C.39575

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2017

Transaction ID : SA11C.40591

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

C. ASSOCIATED BUILDERS AND CONTRACTORS PAC (ABC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 1ST ST NW
STE 200

City WASHINGTON State DC Zip Code 20001-2376

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2017

Transaction ID : SA11C.40423

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. ACCESS FINANCIAL SERVICES, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7755 MONTGOMERY RD
STE 400

City CINCINNATI State OH Zip Code 45236-4197

FEC ID number of contributing federal political committee. **C** C00441311

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2017

Transaction ID : SA11C.39581

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (B

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 15TH STREET NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2017

Transaction ID : SA11C.39574

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. CHARTER COMMUNICATIONS INC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 PENNSYLVANIA AVE NW
SUITE 750

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2017

Transaction ID : SA11C.42007

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. COMCAST CORPORATION & NBCUNIVERSAL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 JOHN F KENNEDY BLVD
FL 49

City PHILADELPHIA	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11C.42010

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042-4511
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FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2017

Transaction ID : SA11C.40437

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FEDERAL EXPRESS POLITICAL ACTION COMMITTEE (FEDEX PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2017

Transaction ID : SA11C.39579

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. FOOD MARKETING INSTITUTE POLITICAL ACTION COMMITTEE (FOODPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2345 CRYSTAL DRIVE
SUITE 800

City ARLINGTON State VA Zip Code 22202-4813

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 13 / 2017

Transaction ID : SA11C.39578

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 PENNSYLVANIA AVENUE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2017

Transaction ID : SA11C.40522

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. GOOGLE INC. NETPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 NEW YORK AVENUE NW
FLOOR 2

City WASHINGTON State DC Zip Code 20005

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2017

Transaction ID : SA11C.42009

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. LEIDOS INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 LABORATORY ROAD

City OAK RIDGE	State TN	Zip Code 37830-6912
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00546234

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2017

Transaction ID : SA11C.41444

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1095 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10036-6797
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2017

Transaction ID : SA11C.40566

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16011 NE 36TH WAY

City REDMOND	State WA	Zip Code 98052-6301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2017

Transaction ID : SA11C.41595

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1600 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3466
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2017

Transaction ID : SA11C.41594

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11C.42008

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. PAC (REITPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1875 I STREET NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

Transaction ID : SA11C.42018

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2017

Transaction ID : SA11C.40523

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314-2886

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2017

Transaction ID : SA11C.40592

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION PAC (NCTA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVENUE NW
SUITE 100

City WASHINGTON State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2017

Transaction ID : SA11C.42012

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE (NEMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 619911

City DALLAS	State TX	Zip Code 75261-9911
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2017

Transaction ID : SA11C.39580

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION PAC (NECA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 BETHESDA METRO CTR
STE 1100

City BETHESDA	State MD	Zip Code 20814-6302
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2017

Transaction ID : SA11C.41443

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL MULTIFAMILY HOUSING COUNCIL PAC (NMHC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 EYE STREET, NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20006-2424
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2017

Transaction ID : SA11C.40424

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. PG&E CORPORATION EMPLOYEES ENERGYPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 BEALE STREET
PO BOX 770000 B29H

City SAN FRANCISCO State CA Zip Code 94105-1814

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2017

Transaction ID : SA11C.41445

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 K STREET NW
SUITE 800W

City WASHINGTON State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2017

Transaction ID : SA11C.41551

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. QC HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 INDIAN CREEK PKWY
STE 1500

City OVERLAND PARK State KS Zip Code 66210-2020

FEC ID number of contributing federal political committee. **C** C00411769

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2017

Transaction ID : SA11C.39584

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 WILSON BOULEVARD
SUITE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
06 / 19 / 2017
Transaction ID : SA11C.42017

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 N

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 21 / 2017
Transaction ID : SA11C.42015

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. TARGETCITIZENS POLITICAL FORUM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 NICOLLET MALL
TPN-1101

City MINNEAPOLIS State MN Zip Code 55403-2542

FEC ID number of contributing federal political committee. **C** C00098061

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 30 / 2017
Transaction ID : SA11C.40524

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 F STREET NW
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2017

Transaction ID : SA11C.41593

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET NW
SUITE 350

City WASHINGTON State DC Zip Code 20005-6621

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2017

Transaction ID : SA11C.40525

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. UNITED PARCEL SERVICE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2017

Transaction ID : SA11C.39576

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA E

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : SA11C.40568

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9900 BREN RD E

City MINNETONKA	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

Transaction ID : SA11C.41552

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PA)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 I STREET NW
SUITE 400

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

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11C.42011

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 15TH STREET NW
SUITE 430

City WASHINGTON State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2017

Transaction ID : SA11C.42013

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	160500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. MCMORRIS RODGERS AMERICAN DREAM PROJECT; THE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
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FEC ID number of contributing federal political committee. **C** C00543199

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
65916.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

Transaction ID : SA12.40439

Amount of Each Receipt this Period
17494.63

Memo Item
TRANSFER

B. BOKHARI, RAZA, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 437 N SPRING MILL RD

City VILLANOVA	State PA	Zip Code 19085-1925
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
PARKWAY CLINICAL LABORATORIES CHAIRMAN AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

Transaction ID : SA.40414.3.001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. LUMRY, PATRICIA, R., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 6847

City BELLEVUE	State WA	Zip Code 98008-0847
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

Transaction ID : SA.40413.3.001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

SUBTOTAL of Receipts This Page (optional).....	17494.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. LUMRY, RUFUS, W., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6847

City BELLEVUE	State WA	Zip Code 98008-0847
------------------	-------------	------------------------

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

Name of Employer (for Individual) ACORN ADVISORS	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2017
Transaction ID : SA.40412.3.001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. TUREK, GEORGE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 N TRANQUIL PATH

City THE WOODLANDS	State TX	Zip Code 77380-2756
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) NES SERVICES, INC.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2017
Transaction ID : SA.40409.3.001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. TUREK, LINDA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 N TRANQUIL PATH

City THE WOODLANDS	State TX	Zip Code 77380-2756
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2017
Transaction ID : SA.40410.3.001

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. MCMORRIS RODGERS AMERICAN DREAM PROJECT; THE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00543199

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
65916.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : SA12.40612

Amount of Each Receipt this Period
7255.39

Memo Item
TRANSFER

B. BEZNOS, HAROLD, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 31731 NORTHWESTERN HWY SUITE 250W

City FARMINGTON HILLS	State MI	Zip Code 48334-1668
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
SELF EMPLOYED REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2017

Transaction ID : SA.40466.3.Q1.2

Amount of Each Receipt this Period
4600.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. KUKRAL, JOHN, Z., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8 ROCKY POINT RD

City OLD GREENWICH	State CT	Zip Code 06870-2314
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
NORTHWOOD INVESTORS CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Transaction ID : SA.40563.3.Q1.2

Amount of Each Receipt this Period
4600.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

SUBTOTAL of Receipts This Page (optional).....	7255.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. SABIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 PANTINGO PLACE
 STE 102
 City EAST HAMPTON State NY Zip Code 11937-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SABIN METAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt **03 / 31 / 2017**
Transaction ID : SA.40564.3.Q1.2
 Amount of Each Receipt this Period 4600.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. MCMORRIS RODGERS AMERICAN DREAM PROJECT; THE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2485
 City SPRINGFIELD State VA Zip Code 22152-0485
 FEC ID number of contributing federal political committee. **C** C00543199
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65916.48

Date of Receipt **04 / 30 / 2017**
Transaction ID : SA12.41459
 Amount of Each Receipt this Period 5099.96
 Memo Item
 TRANSFER

C. HOSSEINI, DARIUSH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25221 PRADO DEL MISTERIO
 City CALABASAS State CA Zip Code 91302-3600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO Occupation (for Individual) DOMINO'S FRANCHISE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **02 / 22 / 2017**
Transaction ID : SA.40406.3.Q2.1
 Amount of Each Receipt this Period 2100.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

SUBTOTAL of Receipts This Page (optional).....	5099.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. PELLINI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33841 NIGUEL SHORES DR

City DANA POINT	State CA	Zip Code 92629-4224
--------------------	-------------	------------------------

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

Name of Employer (for Individual) FOUNDATION MEDICINE	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2017

Transaction ID : SA.41448.3.Q2.1

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. MCMORRIS RODGERS AMERICAN DREAM PROJECT; THE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00543199

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
65916.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2017

Transaction ID : SA12.41555

Amount of Each Receipt this Period
8228.24

Memo Item
TRANSFER

C. FREEMAN, F. KEMPER, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1012

City BELLEVUE	State WA	Zip Code 98009-1012
------------------	-------------	------------------------

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

Name of Employer (for Individual) KEMPER DEVELOPMENT CO.	Occupation (for Individual) COMMERCIAL REAL ESTATE DEVEL
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

Transaction ID : SA.41454.3.Q2.2

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

SUBTOTAL of Receipts This Page (optional).....	8228.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. FROST, HOLLOWAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667

City HOUSTON	State TX	Zip Code 77001-0667
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.26

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2017
Transaction ID : SA.41435.3.Q2.2

Amount of Each Receipt this Period
630.26

Memo Item
TRANSFER
TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. PETRIZZO, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 MCGILVRA BLVD E

City SEATTLE	State WA	Zip Code 98112-4423
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) THE PETRIZZO GROUP		Occupation (for Individual) GOVERNMENT RELATIONS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2017
Transaction ID : SA.41540.3.Q2.2

Amount of Each Receipt this Period
600.00

Memo Item
TRANSFER
TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. ROWLEY, GEORGE, W., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 965

City ISSAQUAH	State WA	Zip Code 98027-0036
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ROWLEY ENTERPRISES INC.		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017
Transaction ID : SA.41542.3.Q2.2

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM AMERICAN DREAM PROJECT JFC

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. WALL, KATHALEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.25

Date of Receipt 04 / 19 / 2017
Transaction ID : SA.41436.3.Q2.2
 Amount of Each Receipt this Period 630.25
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. MCMORRIS RODGERS AMERICAN DREAM PROJECT; THE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2485
 City SPRINGFIELD State VA Zip Code 22152-0485
 FEC ID number of contributing federal political committee. **C** C00543199
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65916.48

Date of Receipt 06 / 30 / 2017
Transaction ID : SA12.41887
 Amount of Each Receipt this Period 27838.26
 Memo Item
 TRANSFER

C. BEZNOS, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31731 NORTHWESTERN HWY SUITE 250W
 City FARMINGTON HILLS State MI Zip Code 48334-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA.41793.3.Q2.3
 Amount of Each Receipt this Period 400.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

SUBTOTAL of Receipts This Page (optional).....	27838.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. FISHER, CYNTHIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 PARK STREET
 City NEWTON State MA Zip Code 02458-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATERREV, LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 08 / 2017
Transaction ID : SA.41576.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. GILLESPIE, ERIC, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 N. LYNN ST.
 City ARLINGTON State VA Zip Code 22209-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POPLICUS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA.41881.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. LOEB, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CENTRAL PARK W PENTHOUSE 39
 City NEW YORK State NY Zip Code 10023-7719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD POINT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA.41814.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. PEROT, H.R., , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 269014
 City PLANO State TX Zip Code 75026-9014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEROT SYSTEMS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA.41818.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. PEROT, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 269014
 City PLANO State TX Zip Code 75026-9014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2017
Transaction ID : SA.41817.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

C. PIGOTT, CHARLES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 106TH AVENUE NE
 City BELLEVUE State WA Zip Code 98004-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2017
Transaction ID : SA.41604.3.Q2.3
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM AMERICAN DREAM PROJECT JFC

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SOON.SHIONG, PATRICK, , ,

Mailing Address **9922 JEFFERESON BLVD.**

City CULVER CITY	State CA	Zip Code 90232-3506
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) NANTWORKS	Occupation (for Individual) EXECUTIVE/CHAIRMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 30 / 2017

Transaction ID : SA.41884.3.Q2.3

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM AMERICAN DREAM PROJECT JFC

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	65916.48

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

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

FOR LINE NUMBER: PAGE 33 OF 64
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. CAPITAL GIFTS & AWARDS, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2012 RENARD COURT
UNIT K

City ANNAPOLIS	State MD	Zip Code 21401
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		12		2017

Transaction ID : SA15.5261

Amount of Each Receipt this Period
291.25

Memo Item
REFUND - OVERPAYMENT

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	291.25
TOTAL This Period (last page this line number only).....	291.25

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

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

FOR LINE NUMBER: PAGE 34 OF 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SUPPORTING UNITED STATES OF AMERICA'S NEXT LEADERS PAC (SUSAN PAC)

Mailing Address 9425 N MERIDIAN ST
237

City INDIANAPOLIS State IN Zip Code 46260-1308

FEC ID number of contributing federal political committee. **C** C00453324

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2017

Transaction ID : SA16.4852

Amount of Each Receipt this Period
2500.00

Memo Item
REFUND

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT

003
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I4399
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. BOBBY VAN'S GRILL

Mailing Address 1201 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
FOOD/BEVERAGE

003
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I4400
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT

001
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I4536
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. LOEWS PHILADELPHIA HOTEL

Mailing Address 1200 MARKET STREET

City PHILADELPHIA State PA Zip Code 19107

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4759

Amount of Each Disbursement this Period

[REDACTED] 2588.98

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4651

Amount of Each Disbursement this Period

[REDACTED] 291.25

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL GIFTS & AWARDS, INC.

Mailing Address 2012 RENARD COURT
UNIT K

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

003
Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4652

Amount of Each Disbursement this Period

[REDACTED] 291.25

Memo Item

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

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

[REDACTED] 291.25

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City
WASHINGTON

State
DC

Zip Code
20003-1164

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3285

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City
WASHINGTON

State
DC

Zip Code
20003-1164

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3293

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City
WASHINGTON

State
DC

Zip Code
20003-1164

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4345

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

3	6	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)
A. ARISTOTLE INTERNATIONAL, INC.

Date of Disbursement: MM / DD / YYYY
03 / 31 / 2017

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement: COMPLIANCE SOFTWARE
Candidate Name: _____
Category/Type: 001

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

FEC Identification Number: C
Transaction ID : **SB21B.I4535**
Amount of Each Disbursement this Period: 120.00

Memo Item

Full Name (Last, First, Middle Initial)
B. ARISTOTLE INTERNATIONAL, INC.

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement: CREDIT CARD MERCHANT FEE
Candidate Name: _____
Category/Type: 003

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

FEC Identification Number: C
Transaction ID : **SB21B.I4741**
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ARISTOTLE INTERNATIONAL, INC.

Date of Disbursement: MM / DD / YYYY
04 / 21 / 2017

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement: COMPLIANCE SOFTWARE
Candidate Name: _____
Category/Type: 001

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

FEC Identification Number: C
Transaction ID : **SB21B.I4744**
Amount of Each Disbursement this Period: 120.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 490.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City
WASHINGTON

State
DC

Zip Code
20003-1164

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I4745
Amount of Each Disbursement this Period
120.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City
WASHINGTON

State
DC

Zip Code
20003-1164

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I5259
Amount of Each Disbursement this Period
120.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BERKE FARAH LLP

Mailing Address 1200 NEW HAMPSHIRE AVENUE, NW
SUITE 800

City
WASHINGTON

State
DC

Zip Code
20036-6805

Purpose of Disbursement
LEGAL FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I3403
Amount of Each Disbursement this Period
8000.00

Memo Item

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

8240.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. CAPITAL GIFTS & AWARDS, INC.

Mailing Address 2012 RENARD COURT
UNIT K

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
EVENT SUPPLIES

001
 002
 003
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
06 / 06 / 2017

FEC Identification Number
C
Transaction ID : SB21B.I4755
Amount of Each Disbursement this Period
1165.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 03 / 2017

FEC Identification Number
C
Transaction ID : SB21B.I4344
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
04 / 03 / 2017

FEC Identification Number
C
Transaction ID : SB21B.I4539
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

1665.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4654

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 05 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4756

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CONCENTRIC OFFICE, LLC

Mailing Address 8136 OLD KEENE MILL ROAD
SUITE A300

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement
COMPLIANCE SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 07 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3373

Amount of Each Disbursement this Period

[REDACTED] 1670.47

Memo Item

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

[REDACTED] 2170.47

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. CONCENTRIC OFFICE, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8136 OLD KEENE MILL ROAD
SUITE A300

M M M	/	D D D	/	Y Y Y Y Y
04		20		2017

City SPRINGFIELD State VA Zip Code 22152

FEC Identification Number

Purpose of Disbursement
COMPLIANCE CONSULTING

C

Candidate Name

001
Category/ Type

Transaction ID : SB21B.I4572
Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

1753.40

Memo Item

B. MEDIA TOWN MARKETING

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 730 ARTHUR STREET
NEWMARKET ONTARIO

M M M	/	D D D	/	Y Y Y Y Y
01		05		2017

City CANADA State ZZ Zip Code 99999

FEC Identification Number

Purpose of Disbursement
WEBSITE HOSTING

C

Candidate Name

003
Category/ Type

Transaction ID : SB21B.I3185
Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

204.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
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City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

--

Memo Item

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

1957.40

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

18985.01

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. BERGMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address N5070 CISCO LAKE RD

M M M	/	D D D	/	Y Y Y Y Y
03		29		2017

City WATERSMEET State MI Zip Code 49969-9739

FEC Identification Number

Purpose of Disbursement
COMMITTEE CONTRIBUTION

C	H6MI01226
---	-----------

Candidate Name
BERGMAN, JOHN, , ,

011
Category/ Type

Transaction ID : SB23.I4404

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 01

5000.00

Memo Item

B. BERGMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address N5070 CISCO LAKE RD

M M M	/	D D D	/	Y Y Y Y Y
06		27		2017

City WATERSMEET State MI Zip Code 49969-9739

FEC Identification Number

Purpose of Disbursement
COMMITTEE CONTRIBUTION

C	H6MI01226
---	-----------

Candidate Name
BERGMAN, JOHN, , ,

011
Category/ Type

Transaction ID : SB23.I5057

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 01

2000.00

Memo Item

C. BLUM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2728 ASBURY RD
STE 400

M M M	/	D D D	/	Y Y Y Y Y
06		21		2017

City DUBUQUE State IA Zip Code 52001-2969

FEC Identification Number

Purpose of Disbursement
COMMITTEE CONTRIBUTION

C	H2IA01055
---	-----------

Candidate Name
BLUM, RODNEY LELAND, , ,

011
Category/ Type

Transaction ID : SB23.I5253

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IA District: 01

2500.00

Memo Item

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

9500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. BRIAN FITZPATRICK FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 939

City
LANGHORNE

State
PA

Zip Code
19047-0939

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
FITZPATRICK, BRIAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		1	4		2	0	1	7		

FEC Identification Number

C H6PA08277

Transaction ID : SB23.I4376

Amount of Each Disbursement this Period

5000.00

Memo Item

B. CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 8770 SW 72ND ST

City
MIAMI

State
FL

Zip Code
33173-3512

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
CURBELO, CARLOS, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	1		2	0	1	7		

FEC Identification Number

C H4FL26038

Transaction ID : SB23.I5254

Amount of Each Disbursement this Period

2500.00

Memo Item

C. CITIZENS FOR JOHN RUTHERFORD

Full Name (Last, First, Middle Initial)

Mailing Address 3030 HARTLEY RD
STE 120

City
JACKSONVILLE

State
FL

Zip Code
32257-8210

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
RUTHERFORD, JOHN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	7		2	0	1	7		

FEC Identification Number

C H6FLO4105

Transaction ID : SB23.I5065

Amount of Each Disbursement this Period

2000.00

Memo Item

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

9500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. CLAUDIA TENNEY FOR CONGRESS

Mailing Address 28 ROBINSON RD.
PO BOX 128

City CLINTON State NY Zip Code 13323

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
TENNEY, CLAUDIA, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NY District: 22

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2017

FEC Identification Number

C C00632828

Transaction ID : SB23.I4375

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. COFFMAN FOR CONGRESS 2018

Mailing Address 4950 S YOSEMITE ST F2 #511

City GREENWOOD State CO Zip Code 80111

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
COFFMAN, MIKE , REP., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2017

FEC Identification Number

C C00629287

Transaction ID : SB23.I5258

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COMER FOR CONGRESS

Mailing Address P.O. BOX 338

City TOMPKINSVILLE State KY Zip Code 42167-0338

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
COMER, JAMES, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: KY District: 01

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2017

FEC Identification Number

C H6KY01110

Transaction ID : SB23.I5059

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

9500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)
A. COMSTOCK FOR CONGRESS

Mailing Address P.O. BOX 831

City MCLEAN State VA Zip Code 22101-0831

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
COMSTOCK, BARBARA, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: VA District: 10

Date of Disbursement

/ /

FEC Identification Number

C H4VA10089

Transaction ID : SB23.I4378

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
B. DENHAM FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DRIVE
SUITE 150

City SACRAMENTO State CA Zip Code 95833-4131

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
DENHAM, JEFF, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: CA District: 00

Date of Disbursement

/ /

FEC Identification Number

C H0CA19173

Transaction ID : SB23.I5252

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C. DON BACON FOR CONGRESS

Mailing Address P.O. BOX 391368

City OMAHA State NE Zip Code 68139-1368

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
BACON, DONALD, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: NE District: 02

Date of Disbursement

/ /

FEC Identification Number

C H6NE02125

Transaction ID : SB23.I5251

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. DREW FERGUSON FOR CONGRESS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2017

Mailing Address P.O. BOX 387

FEC Identification Number

C H6GA03113

City WEST POINT State GA Zip Code 31833-0387

Transaction ID : SB23.I5061

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

2000.00

Candidate Name
FERGUSON, ANDERSON, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: GA District: 03

Full Name (Last, First, Middle Initial)

B. FASO FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2017

Mailing Address P.O. BOX 448

FEC Identification Number

C H6NY19169

City KINDERHOOK State NY Zip Code 12106-0448

Transaction ID : SB23.I4374

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

5000.00

Candidate Name
FASO, JOHN J., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: NY District: 19

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MATT GAETZ

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2017

Mailing Address 610 S BOULEVARD

FEC Identification Number

C H6FL01119

City TAMPA State FL Zip Code 33606-2647

Transaction ID : SB23.I4343

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

2500.00

Candidate Name
GAETZ, MATT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

Memo Item

State: FL District: 01

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

9500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial) A. FRIENDS OF AMATA		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017
Mailing Address P.O. BOX 6171		FEC Identification Number C 000393041 Transaction ID : SB23.I4723
City PAGO PAGO	State AS	Zip Code 96799-6171
Purpose of Disbursement COMMITTEE CONTRIBUTION		011 Category/ Type
Candidate Name AMATA, AUMUA, , ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AS	District: 00	

Full Name (Last, First, Middle Initial) B. FRIENDS OF NEAL DUNN		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017
Mailing Address PO BOX 16088		FEC Identification Number C 000582304 Transaction ID : SB23.I5060
City PANAMA CIT	State FL	Zip Code 32406
Purpose of Disbursement COMMITTEE CONTRIBUTION		011 Category/ Type
Candidate Name DUNN, NEAL , PATRICK , , MD, FACS		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 02	

Full Name (Last, First, Middle Initial) C. FRIENDS OF ERIK PAULSEN		Date of Disbursement MM / DD / YYYY 06 / 21 / 2017
Mailing Address P.O. BOX 44369 250 PRAIRIE CENTER DRIVE		FEC Identification Number C H8MN03077 Transaction ID : SB23.I5260
City EDEN PRAIRIE	State MN	Zip Code 55344-1369
Purpose of Disbursement COMMITTEE CONTRIBUTION		011 Category/ Type
Candidate Name PAULSEN, ERIK, , ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MN	District: 03	

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. GREG FOR MONTANA

Full Name (Last, First, Middle Initial)
GREG FOR MONTANA

Date of Disbursement: 03 / 20 / 2017

Mailing Address: PO BOX 877, 400 N. CALIFORNIA

City: HELENA, State: MT, Zip Code: 59624-0877

Purpose of Disbursement: COMMITTEE CONTRIBUTION

Candidate Name: GIANFORTE, GREG, , ,

Office Sought: House, Senate, President

Disbursement For: 2017, Primary, General, Other (specify) Special General

State: MT, District: 00

FEC Identification Number: C00631945
Transaction ID: SB23.I4381
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

B. HANDEL FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
HANDEL FOR CONGRESS, INC.

Date of Disbursement: 02 / 28 / 2017

Mailing Address: 4010 OLD MILTON PKWY

City: ALPHARETTA, State: GA, Zip Code: 30005

Purpose of Disbursement: COMMITTEE CONTRIBUTION

Candidate Name: HANDEL, KAREN, CHRISTINE, ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) Special General

State: GA, District: 06

FEC Identification Number: C00633362
Transaction ID: SB23.I4342
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

C. HURD FOR CONGRESS

Full Name (Last, First, Middle Initial)
HURD FOR CONGRESS

Date of Disbursement: 03 / 14 / 2017

Mailing Address: P.O. BOX 761029

City: SAN ANTONIO, State: TX, Zip Code: 78245-6029

Purpose of Disbursement: COMMITTEE CONTRIBUTION

Candidate Name: HURD, WILLIAM, , ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) Special General

State: TX, District: 22

FEC Identification Number: C H0TX23086
Transaction ID: SB23.I4377
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. ISSA FOR CONGRESS

Mailing Address PO BOX 760

City
VISTA

State
CA

Zip Code
92085

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
ISSA, DARRELL, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 49

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2017

FEC Identification Number

C C00350520

Transaction ID : SB23.I4371

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JASON LEWIS FOR CONGRESS, INC.

Mailing Address 13800 NICOLLET BLVD.
PO BOX 3055

City
BURNSVILLE

State
MN

Zip Code
55337

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
LEWIS, JASON , MARK , , MR.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2017

FEC Identification Number

C C00589234

Transaction ID : SB23.I4373

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JASON LEWIS FOR CONGRESS, INC.

Mailing Address 13800 NICOLLET BLVD.
PO BOX 3055

City
BURNSVILLE

State
MN

Zip Code
55337

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
LEWIS, JASON , MARK , , MR.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2017

FEC Identification Number

C C00589234

Transaction ID : SB23.I5063

Amount of Each Disbursement this Period

2000.00

Memo Item

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

12000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 727

City
HUNTINGTON

State
WV

Zip Code
25711-0727

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
JENKINS, EVAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WV District: 03

Date of Disbursement

/ /

FEC Identification Number

C H4WV03070

Transaction ID : SB23.I4402

Amount of Each Disbursement this Period

Memo Item

B. KATKO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 133

City
CAMILLUS

State
NY

Zip Code
13031-0133

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
KATKO, JOHN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NY District: 00

Date of Disbursement

/ /

FEC Identification Number

C H4NY24073

Transaction ID : SB23.I5256

Amount of Each Disbursement this Period

Memo Item

C. KUSTOFF FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 1661 AARON BRENNER DR.
STE 300

City
MEMPHIS

State
TN

Zip Code
38120-1466

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
KUSTOFF, DAVID, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

/ /

FEC Identification Number

C H2TN07103

Transaction ID : SB23.I5062

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. LAHOOD FOR CONGRESS

Mailing Address P.O. BOX 10735

City
PEORIA

State
IL

Zip Code
61612-0735

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name

LAHOOD, DARIN MACKAY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 12

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

FEC Identification Number

C H6IL18088

Transaction ID : SB23.I4743

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LIZ CHENEY FOR WYOMING

Mailing Address P.O. BOX 697

City
CASPER

State
WY

Zip Code
82602-0697

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name

CHENEY, ELIZABETH, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: WY District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2017

FEC Identification Number

C H6WY00159

Transaction ID : SB23.I5058

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAST FOR CONGRESS

Mailing Address PO BOX 3016

City
STUART

State
FL

Zip Code
34995

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name

MAST, BRIAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 14 / 2017

FEC Identification Number

C C00632257

Transaction ID : SB23.I4537

Amount of Each Disbursement this Period

5000.00

Memo Item

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

9500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3016

City STUART State FL Zip Code 34995

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
MAST, BRIAN, , ,

Office Sought: House Senate President
State: FL District: 18

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 27 / 2017

FEC Identification Number: C00632257
Transaction ID : SB23.I5064
Amount of Each Disbursement this Period: 2000.00

Category/Type: 011

Memo Item

B. MCSALLY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 19128

City TUCSON State AZ Zip Code 85731-9128

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
MCSALLY, MARTHA, , ,

Office Sought: House Senate President
State: AZ District: 04

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 21 / 2017

FEC Identification Number: C H2AZ08102
Transaction ID : SB23.I5250
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

C. POLIQUIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 50

City OAKLAND State ME Zip Code 04963-0050

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
POLIQUIN, BRUCE, , ,

Office Sought: House Senate President
State: ME District: 02

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: C H4ME02234
Transaction ID : SB23.I4403
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. POLIQUIN FOR CONGRESS

Mailing Address P.O. BOX 50

City OAKLAND State ME Zip Code 04963-0050

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
POLIQUIN, BRUCE, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: ME District: 02

Date of Disbursement

/ /

FEC Identification Number

C H4ME02234

Transaction ID : SB23.I5249

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH NORMAN FOR CONGRESS

Mailing Address 907 MAPLE HILL LANE

City ROCK HILL State SC Zip Code 29732

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
NORMAN, RALPH, W. , , JR.

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) Special General

State: SC District: 05

Date of Disbursement

/ /

FEC Identification Number

C C00633610

Transaction ID : SB23.I4742

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. RON ESTES FOR CONGRESS

Mailing Address 12224 E BRACKEN CT

City WICHITA State KS Zip Code 67206-4126

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
ESTES, RON, , ,

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) Special General

State: KS District: 04

Date of Disbursement

/ /

FEC Identification Number

C C00632067

Transaction ID : SB23.I4380

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROS-LEHTINEN FOR CONGRESS

Mailing Address P.O. BOX 522784

City MIAMI State FL Zip Code 33152-2784

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
ROS-LEHTINEN, ILEANA, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 13

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2017

FEC Identification Number

C H0FL18025

Transaction ID : SB23.I4401

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STEVE KNIGHT FOR CONGRESS

Mailing Address PO BOX 730

City HILMAR State CA Zip Code 95324-0730

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
KNIGHT, STEVE, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: CA District: 25

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2017

FEC Identification Number

C C00554014

Transaction ID : SB23.I4370

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TEXANS FOR JODEY ARRINGTON

Mailing Address P.O. BOX 6687

City LUBBOCK State TX Zip Code 79493-6687

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name
ARRINGTON, JODEY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 19

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2017

FEC Identification Number

C H6TX19099

Transaction ID : SB23.I5056

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

12000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. VALADAO FOR CONGRESS

Mailing Address 5132 N PALM AVE
227

City FRESNO State CA Zip Code 93704-2236

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
VALADAO, DAVID, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 00

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2017

FEC Identification Number

C H2CA20094

Transaction ID : SB23.I4369

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VICKY HARTZLER FOR CONGRESS

Mailing Address P.O. BOX 531

City HARRISONVILLE State MO Zip Code 64701-0531

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
HARTZLER, VICKY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: MO District: 05

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2017

FEC Identification Number

C H0MO04086

Transaction ID : SB23.I3475

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. YOUNG FOR IOWA, INC.

Mailing Address P.O. BOX 162

City VAN METER State IA Zip Code 50261-0162

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name
YOUNG, DAVID, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2017

FEC Identification Number

C H4IA03115

Transaction ID : SB23.I5255

Amount of Each Disbursement this Period

2500.00

Memo Item

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

8500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

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

Date of Disbursement: / /

Mailing Address P.O. BOX 3535

City: BALLWIN State: MO Zip Code: 63022-3535

Purpose of Disbursement: COMMITTEE CONTRIBUTION
Candidate Name: Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: Transaction ID : **SB23.I4649**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. COMMON SENSE COMMON SOLUTIONS PAC

Date of Disbursement: / /

Mailing Address 901 N WASHINGTON ST, SUITE 700

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: COMMITTEE CONTRIBUTION
Candidate Name: Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C00345058 Transaction ID : **SB23.I4719**
Amount of Each Disbursement this Period:
 Memo Item

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

Date of Disbursement: / /

Mailing Address 3465 N PINES WAY, SUITE 104

City: WILSON State: WY Zip Code: 83014

Purpose of Disbursement: COMMITTEE CONTRIBUTION
Candidate Name: Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C00638130 Transaction ID : **SB23.I4645**
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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial) A. DEFENDING AND INVESTING IN AMERICA'S NEW ENDEAVORS PAC (DIANE PAC)		Date of Disbursement MM / DD / YYYY 04 / 25 / 2017
Mailing Address P.O. BOX 1437		FEC Identification Number C Transaction ID : SB23.I4643 Amount of Each Disbursement this Period 2500.00
City GALLATIN	State TN	
Zip Code 37066-1437		Memo Item <input type="checkbox"/>
Purpose of Disbursement COMMITTEE CONTRIBUTION		
Candidate Name		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. E-PAC		Date of Disbursement MM / DD / YYYY 04 / 25 / 2017
Mailing Address P.O. BOX 500		FEC Identification Number C Transaction ID : SB23.I4648 Amount of Each Disbursement this Period 2500.00
City GLENS FALLS	State NY	
Zip Code 12801-0500		Memo Item <input type="checkbox"/>
Purpose of Disbursement COMMITTEE CONTRIBUTION		
Candidate Name		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. JUMP INTO ACTION FOR CONSERVATIVES TO KEEP OUR IDEAS ELEVATED PAC		Date of Disbursement MM / DD / YYYY 04 / 25 / 2017
Mailing Address P.O. BOX 26141		FEC Identification Number C Transaction ID : SB23.I4650 Amount of Each Disbursement this Period 2500.00
City ALEXANDRIA	State VA	
Zip Code 22313-6141		Memo Item <input type="checkbox"/>
Purpose of Disbursement COMMITTEE CONTRIBUTION		
Candidate Name		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)
A. LIBERTY FUND; THE

Mailing Address PO BOX 1992

City VANCOUVER State WA Zip Code 98668

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 25 / 2017

FEC Identification Number: C00521310
Transaction ID : SB23.I4647
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. LIMITED GOVERNMENT, OPPORTUNITY AND VALUES PAC (LOV PAC)

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-1332

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number: C00541680
Transaction ID : SB23.I4721
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (MARSHA PAC)

Mailing Address PO BOX 3241

City BRENTWOOD State TN Zip Code 37024-3241

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number: C00409276
Transaction ID : SB23.I4717
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. MAKING INVESTMENTS MAJORITY INSURED PAC

Mailing Address 9070 IRVINE CENTER DRIVE, #150

City IRVINE State CA Zip Code 92618-4691

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00564658

Transaction ID : SB23.I4726

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. MARTHA PAC

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314-1837

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00527309

Transaction ID : SB23.I4724

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NOVA PAC

Mailing Address 332 W LEE HWY
303

City WARRENTON State VA Zip Code 20186-2428

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB23.I4646

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. SUPPORTING UNITED STATES OF AMERICA'S NEXT LEADERS PAC (SUSAN PAC)

Full Name (Last, First, Middle Initial)
Date of Disbursement: 04 / 25 / 2017

Mailing Address 9425 N MERIDIAN ST # 237

City INDIANAPOLIS State IN Zip Code 46260-1308

Purpose of Disbursement COMMITTEE CONTRIBUTION
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB23.I4644
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. TENACIOUS PAC

Full Name (Last, First, Middle Initial)
Date of Disbursement: 05 / 18 / 2017

Mailing Address 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMMITTEE CONTRIBUTION
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB23.I4725
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. THUNDERBOLT PAC

Full Name (Last, First, Middle Initial)
Date of Disbursement: 05 / 18 / 2017

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement COMMITTEE CONTRIBUTION
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB23.I4722
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. VICKY PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 172

City HARRISONVILLE State MO Zip Code 64701

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C00499798

Transaction ID : SB23.I4720

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. VICTORY AND FREEDOM PAC (VAF PAC)

Full Name (Last, First, Middle Initial)

Mailing Address 1666 K ST, NW STE 500

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C00525212

Transaction ID : SB23.I4718

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement COMMITTEE CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C00075820

Transaction ID : SB23.I4152

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003-1838

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	7

FEC Identification Number

C C00075820

Transaction ID : SB23.I4653

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003-1838

Purpose of Disbursement
COMMITTEE CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	7

FEC Identification Number

C C00075820

Transaction ID : SB23.I5070

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

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

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

1	9	2	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
CMR Political Action Committee

Full Name (Last, First, Middle Initial) A. KRISTI FOR GOVERNOR		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017
Mailing Address PO BOX 15239		FEC Identification Number C [] Transaction ID : SB29.I4393 Amount of Each Disbursement this Period [] 2500.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Purpose of Disbursement NON FEDERAL COMMITTEE CONTRIBUTION		FEC Identification Number C [] Amount of Each Disbursement this Period [] 2500.00 <input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC Identification Number C [] Amount of Each Disbursement this Period [] 2500.00 <input type="checkbox"/> Memo Item
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2500.00
TOTAL This Period (last page this line number only).....▶	[] 2500.00