



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Independence USA PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="238808.70"/>	<input type="text" value="238808.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="172423.39"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="183942.11"/>	<input type="text" value="234112.90"/>
(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="356365.50"/>	<input type="text" value="472921.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="234509.19"/>	<input type="text" value="351065.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="121856.31"/>	<input type="text" value="121856.31"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2750.75"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Independence USA PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	183394.00	223991.29
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	183394.00	223991.29
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	548.11	548.11
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	183942.11	224539.40
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	9573.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	183942.11	234112.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	183942.11	234112.90

**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 .....	234509.19	351065.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	234509.19	351065.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	234509.19	351065.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	234509.19	351065.29

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	183942.11	224539.40
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	183942.11	224539.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	234509.19	351065.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9573.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	234509.19	341491.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<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	<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)  
**Independence USA PAC**

**A. Michael R. Bloomberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

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

Name of Employer Bloomberg LP Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
105991.29

Date of Receipt  
06 / 03 / 2016  
Transaction ID : SA11AI.5022

Amount of Each Receipt this Period  
65394.00

Memo Item  
In-kind - Project Management

**B. Michael R. Bloomberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

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

Name of Employer Bloomberg LP Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
183991.29

Date of Receipt  
06 / 20 / 2016  
Transaction ID : SA11AI.5217

Amount of Each Receipt this Period  
78000.00

Memo Item  
In-kind - polling (See report filed August 25)

**C. Michael R. Bloomberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

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

Name of Employer Bloomberg LP Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223991.29

Date of Receipt  
06 / 20 / 2016  
Transaction ID : SA11AI.5219

Amount of Each Receipt this Period  
40000.00

Memo Item  
In-kind - Polling for future communication

<b>SUBTOTAL</b> of Receipts This Page (optional).....	183394.00
<b>TOTAL</b> This Period (last page this line number only).....	183394.00

**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 7 OF 12
<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)  
**Independence USA PAC**

Full Name (Last, First, Middle Initial) <b>A. EVERYTOWN FOR GUN SAFETY ACTION FUND</b>		Date of Receipt MM / DD / YYYY 06 / 23 / 2016 <b>Transaction ID : SA11C.5019</b>
Mailing Address PO BOX 4184		Amount of Each Receipt this Period 548.11
City NEW YORK	State NY	Zip Code 10163
FEC ID number of contributing federal political committee. C C90015025	<input type="checkbox"/> Memo Item In-kind - Staff time and related expenses	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.11	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	548.11
<b>TOTAL</b> This Period (last page this line number only).....	548.11

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Independence USA PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 114 W. 47th St.  
6th Floor

City New York State NY Zip Code 10036

Purpose of Disbursement  
Bank fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5009**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael R. Bloomberg**

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

Purpose of Disbursement  
In-kind - Project Management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5023**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael R. Bloomberg**

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

Purpose of Disbursement  
In-kind - polling (See report filed August 25)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5218**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Independence USA PAC**

Full Name (Last, First, Middle Initial)

**A. Michael R. Bloomberg**

Mailing Address 909 Third Avenue

City New York State NY Zip Code 10022

Purpose of Disbursement  
In-kind - Polling for future communication

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2016

**Transaction ID : SB21B.5220**

Amount of Each Disbursement this Period

40000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Connections Media LLC**

Mailing Address 1428 U Street NW  
3rd Floor

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SB21B.5011**

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. EVERYTOWN FOR GUN SAFETY ACTION FUND**

Mailing Address PO BOX 4184

City NEW YORK State NY Zip Code 10163

Purpose of Disbursement  
In-kind - Staff time and related expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : SB21B.5021**

Amount of Each Disbursement this Period

548.11

Memo Item

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

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

40848.11

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Independence USA PAC**

Full Name (Last, First, Middle Initial) <b>A. Revolution Media Group LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2016
Mailing Address 1020 Princess Street		<b>Transaction ID : SB21B.5010</b>
City Alexandria	State VA	
Purpose of Disbursement Media Consulting	Candidate Name	Amount of Each Disbursement this Period 25111.96
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:	Category/Type 004	

Full Name (Last, First, Middle Initial) <b>B. Revolution Media Group LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 1020 Princess Street		<b>Transaction ID : SB21B.5120</b>
City Alexandria	State VA	
Purpose of Disbursement Media consulting for future communication	Candidate Name	Amount of Each Disbursement this Period 22000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Venable LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 575 7th Street, NW		<b>Transaction ID : SB21B.5017</b>
City Washington	State DC	
Purpose of Disbursement Legal Fees	Candidate Name	Amount of Each Disbursement this Period 2800.50
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	49912.46
<b>TOTAL</b> This Period (last page this line number only).....▶	234509.19

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Independence USA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Connections Media LLC</b>	Nature of Debt (Purpose): Website Services
Mailing Address 1428 U Street NW 3rd Floor	
City State Zip Code Washington DC 20009	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5014</b>	
Amount Incurred This Period 300.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JBCconnect CA LLC</b>	Nature of Debt (Purpose): Logo design services
Mailing Address 108 W. 39th Street 7th Floor	
City State Zip Code New York NY 10018	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5027</b>	
Amount Incurred This Period 693.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 693.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Venable LLP</b>	Nature of Debt (Purpose): Legal fees
Mailing Address 575 7th Street, NW	
City State Zip Code Washington DC 20004	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5013</b>	
Amount Incurred This Period 1757.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1757.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2750.75
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2750.75
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2750.75

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

NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00532705
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Douglas E. Schoen NYC LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>08 / 03 / 2016</b>
Mailing Address 1111 Park Avenue	Amount 0.00
City State Zip Code New York NY 10128	<b>Transaction ID : SE.5127</b>
Purpose of Expenditure Polling	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 06 / 2016</b>
Name of Federal Candidate <b>PATRICK JOSEPH TOOMEY</b>	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	0.00

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

*Diane Gubelli*  
Signature

[Electronically Filed] Date **08 / 25 / 2016**