

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


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

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)

## Write or Type Committee Name

Professional Compounding Centers of America Political Action Committee

6. (a) Cash on Hand January 1,
Y-Y
2016
(b) Cash on Hand at

Beginning of Reporting Period. $\qquad$


$\square, 62760.00$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

7. Total Disbursements (from Line 31) $\qquad$


8. Cash on Hand at Close of Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$
$\square 53497.00$

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
$0,0.00$
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
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

## Write or Type Committee Name

## Professional Compounding Centers of America Political Action Committee


19. Total Receipts (add Lines 11(d),
$12,13,14,15,16,17$, and 18(c)) $\ldots \ldots \ldots$ $\square$

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).........


FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) $\qquad$ .... $\downarrow$
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs)..
(d) Total Contribution Refunds
(add Lines 28(a), (b), and (c))...........
30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))...
.... $\downarrow$

|  | 0.00 |
| :---: | :---: |
| $, 0,00$ |  |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

COLUMN A Total This Period


|  | 0.00 |
| :---: | :---: |
|  | 31000.00 |

$0,0.00$

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

0.00
$0,0.00$

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | ,$\quad 0.00$ |
|  | ,$\quad 0.00$ |
|  | 0.00 |

31. Total Disbursements (add Lines 21 (c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).............................................



DETAILED SUMMARY PAGE
of Disbursements
Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) $\qquad$ -
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$



## COLUMN B Calendar Year-to-Date

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

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

FOR LINE NUMBER: $\quad$ PAGE 6 OF 17 (check only one)


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)
Professional Compounding Centers of America Political Action Committee


| Full Name (Last, First, Middle Initial) |
| :--- |
| B. |
| Daynce Ashton |
| Mailing Address 9901 South Wilcrest Dr |
| City |
| Houston |
| FEC ID number of contributing |
| federal political committee. |
| Name of Employer |
| PCCA |

Date of Receipt


Transaction ID : SA11AI. 4793
Amount of Each Receipt this Period

$\square$ Memo Item
Bi-monthly payroll contributions

Date of Receipt

| Mailing Address 3307 Wrangler Ct |  |
| :---: | :---: |
| City Katy | State Zip Code <br> TN 77494 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer PCCA | Occupation VP |
|  | Aggregate Year-to-Date <br> 2500.00 |


| SUBTOTAL of Receipts This Page (optional)..................................................................... | $7680.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ | - , - , - |

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

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

FOR LINE NUMBER: $\quad$ PAGE 7 OF 17 (check only one)


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NAME OF COMmItTEE (In Full)
Professional Compounding Centers of America Political Action Committee


Date of Receipt


Transaction ID : SA11AI. 4779
Amount of Each Receipt this Period
$\square 1000.00$

| Full Name (Last, First, Middle Initial) <br> B. Bruce Biundo |  |  |  |
| :---: | :---: | :---: | :---: |
| Mailing Address 5635 Benning Dr |  |  |  |
| City | State | Zip Code |  |
| Houston | TX | 77096 |  |
| FEC ID number of contributing federal political committee. | C |  |  |
| Name of Employer PCCA | Occupation |  |  |
|  | Consultant |  |  |
|  | Aggregate Year-to-Date $\mathbf{V}$ |  |  |
|  |  |  | 1000.00 |

Date of Receipt


Transaction ID : SA11AI. 4777
Amount of Each Receipt this Period
1000.00

Memo Item

## Full Name (Last, First, Middle Initial)

C. $\frac{\text { Francesca Dawdy }}{\text { Mailing Address } 9901 \text { S. Wilcrest Dr. }}$

| City Houston | State Zip Code <br> TX 77099 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer PCCA | Occupation <br> Director of Marketing \& Communications |
|  | Aggregate Year-to-Date $\square$ <br> 240.00 |

Date of Receipt


Transaction ID : SA11AI. 4800
Amount of Each Receipt this Period
$\square 120.00$

Memo Item
Bi-monthly payroll contributions

| SUBTOTAL of Receipts This Page (optional)..................................................................... | $2120.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: $\quad$ PAGE 8 OF 17 (check only one)


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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4774
Amount of Each Receipt this Period
$\square 5000.00$

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

Mailing Address 11765 Creek View Lane

| City <br> Conroe | State <br> TX | Zip Code <br> 77385 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| PCCA | VP |  |

Date of Receipt


Transaction ID : SA11AI. 4778
Amount of Each Receipt this Period


Memo Item

Full Name (Last, First, Middle Initial)

| Mailing Address 3401 Independence Dr Suite 231 |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35209 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Wellness Pharmacy | Administrator |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $1000.00$ |

Date of Receipt

| $06$ | 03 | $2016$ |
| :---: | :---: | :---: |

Transaction ID : SA11AI. 4788
Amount of Each Receipt this Period

$\square$ Memo Item

| 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: $\quad$ PAGE 9 OF 17 (check only one)


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NAME OF COMmItTEE (In Full)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4783
Amount of Each Receipt this Period
$\square 1000.00$

| Full Name (Last, First, Middle Initial) <br> B. Cyndi Hicks |  |
| :---: | :---: |
| Mailing Address 1319 Bittersweet Dr |  |
| City | State Zip Code |
| Richmond | TX 77406 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| PCCA | Director of Events |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $240.00$ |

Date of Receipt

| $06$ | ' | $\begin{gathered} D \cdot D \\ 30 \end{gathered}$ | , | $2016$ |
| :---: | :---: | :---: | :---: | :---: |

Transaction ID : SA11AI. 4794
Amount of Each Receipt this Period
$\square 120.00$

[^0]Full Name (Last, First, Middle Initial)
C. Jane Jones

Mailing Address 5202 Locust St
$\left.\begin{array}{l|ll|}\hline \begin{array}{l}\text { City } \\ \text { Bellaire }\end{array} & \begin{array}{c}\text { State } \\ \text { TX }\end{array} & \begin{array}{l}\text { Zip Code } \\ 77401\end{array} \\ \hline \begin{array}{l}\text { FEC ID number of contributing } \\ \text { federal political committee. }\end{array} & \text { C } & \\ \hline \text { Name of Employer } & \begin{array}{l}\text { Occupation } \\ \text { Consultant }\end{array} \\ \begin{array}{l|l|l|}\text { PCCA }\end{array} & \text { Aggregate Year-to-Date } \boldsymbol{\nabla}\end{array}\right]$

Date of Receipt


Transaction ID : SA11AI. 4795
Amount of Each Receipt this Period

$\square, 1240.00$

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

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

FOR LINE NUMBER: PAGE 10 OF 17 (check only one)


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)
Professional Compounding Centers of America Political Action Committee


## Full Name (Last, First, Middle Initial)

B. Susan Kloesel

Mailing Address 818 Neal Dr

| City <br> Sugarland | State Zip Code <br> TX 77498 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Retired | Occupation <br> N/A |
| Receipt For: $\square$ Primary $\square$ General $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date <br> 5000.00 |

Date of Receipt


Transaction ID : SA11AI. 4790
Amount of Each Receipt this Period


Memo Item

Full Name (Last, First, Middle Initial)


Date of Receipt

| 06 | $30$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : SA11AI. 4801
Amount of Each Receipt this Period
$\square$ Memo Item
Bi-monthly payroll contributions

|  | 10120.00 |
| :---: | :---: | :---: |

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

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

FOR LINE NUMBER: PAGE 11 OF 17 (check only one)


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)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)

| Mailing Address 1223 E 21 st PI |  |
| :---: | :---: |
| City <br> Tulsa | State Zip Code <br> OK 74114 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer The Apothecary Shoppe | Occupation Owner |
|  | Aggregate Year-to-Date <br> 5000.00 |

Date of Receipt


Transaction ID : SA11AI. 4784
Amount of Each Receipt this Period
$\square 5000.00$

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

Mailing Address 9901 S. Wilcrest Dr

| City | State Zip Code |
| :---: | :---: |
| Houston | TX 77099 |
| FEC ID number of contributing federal political committee. | C |
| $\begin{aligned} & \text { Name of Employer } \\ & \text { PCCA } \end{aligned}$ | Occupation <br> Regional Sales Manager |
|  | Aggregate Year-to-Date <br> 550.00 |

Date of Receipt


Transaction ID : SA11AI. 4796
Amount of Each Receipt this Period

$\square$ Memo Item
Bi-monthly payroll contributions

Date of Receipt


Transaction ID : SA11AI. 4797
Amount of Each Receipt this Period


| $\square$ | 5370.00 |
| :--- | :--- | :--- |

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

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

FOR LINE NUMBER: PAGE 12 OF 17 (check only one)


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)
Professional Compounding Centers of America Political Action Committee

| Full Name (Last, First, Middle Initial) Ernest Rapp |  | Date of Receipt <br> Transaction ID : SA11AI. 4791 |
| :---: | :---: | :---: |
| Mailing Address 4825 Willow |  |  |
| City | State Zip Code <br> TX 77401 |  |
| Bellaire |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  | $1000.00$ |
| Name of Employer PCCA | Occupation <br> Business Development | $\square$ Memo Item |
|  | Aggregate Year-to-Date |  |

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

Mailing Address 9901 S Wilcrest

| City | State Zip Code |
| :---: | :---: |
| Houston | TX 77099 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer PCCA | Occupation <br> Director of Government Relations |
|  | Aggregate Year-to-Date $240.00$ |

Date of Receipt


Transaction ID : SA11AI. 4799
Amount of Each Receipt this Period


[^1]Date of Receipt
Full Name (Last, First, Middle Initial)
C. Jimmy Smith

Mailing Address 16414 Mellow Oaks Lane

| City <br> Sugar Land | State <br> TX | Zip Code <br> 77478 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation <br> President |  |
| PCCA | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ |  | 5000.00 |



Transaction ID : SA11AI. 4775
Amount of Each Receipt this Period
5000.00

[^2]| SUBTOTAL of Receipts This Page (optional)..................................................................... | $6120.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | $43650.00$ |

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



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)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)
A. Professional Compounding Centers of America


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

## Date of Disbursement

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |

## 

Amount of Each Disbursement this Period

- , M,
$\square$ Memo Item

Date of Disbursement

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: State: |  House <br>  <br> Senate <br> $\square$ President |  |  |



| SUBTOTAL of Disbursements This Page (optional)....................................................... | 1040.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | 1040.00 |

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



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)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)
A. BRADY FOR CONGRESS

| Mailing Address PO BOX 8277 |  |  |  |
| :---: | :---: | :---: | :---: |
| City | State Zip Code <br> TX 77387 |  | Transaction ID : SB23.4756 |
| THE WOODLANDS |  |  |  |
| Purpose of Disbursement 2016 General |  |  | Amount of Each Disbursement this Period |
| Candidate Name KEVIN BRADY |  | Category/ Type | $5000.00$ |
| Office Sought: XHouse <br> Senate <br> State: TX District: 08 |  |  | $\square$ Memo Item |

Full Name (Last, First, Middle Initial)
B. FIGHTIN' 9TH PAC


Date of Disbursement

| Mailing Address PO BOX 657 |  |  |
| :---: | :---: | :---: |
| City | State Zip Code |  |
| LEHI | UT 84043 |  |
| Purpose of Disbursement 2016 Primary |  |  |
| Candidate Name CHRIS STEWART |  | Category/ Type |
| Office Sought: XHouse <br> Senate <br>   <br> State: UT District: 02 |  |  |



Transaction ID : SB23.4744

Amount of Each Disbursement this Period
$\square 2500.00$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



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)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)
A. GUTHRIE FOR CONGRESS


Full Name (Last, First, Middle Initial)
B. JOHN S FUND

| Mailing Address PO BOX 853 |  |  | 04 06 2016 |
| :---: | :---: | :---: | :---: |
| City EDWARDSVILLE | State Zip Code <br> IL 62025 |  | Transaction ID : SB23.4752 <br> Amount of Each Disbursement this Period |
| Purpose of Disbursement 2016 |  |  |  |
| Candidate Name JOHN M SHIMKUS |  | Category/ Type | $5000.00$ |
| Office Sought: XHouse <br> Senate <br> President <br> State: IL District: 15 |  |  | $\square$ Memo Item |

Full Name (Last, First, Middle Initial)
c. MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE


Date of Disbursement


Transaction ID : SB23.4772

Amount of Each Disbursement this Period
$\square 1000.00$

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



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NAME OF COMmItTEE (In Full)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)
A. MICHAEL BURGESS FOR CONGRESS

| Mailing Address PO BOX 2334 |  |  | M M     <br> 04 0 0 $y^{\prime}$ 2016 |
| :---: | :---: | :---: | :---: |
| City DENTON | State Zip Code <br> TX 76202 |  | Transaction ID : SB23.4749 <br> Amount of Each Disbursement this Period |
| Purpose of Disbursement 2016 General |  |  |  |
| Candidate Name MICHAEL C. DR. BUR |  | Category/ Type | 2500.00 |
| Office Sought: XHouse <br> Senate <br> State: TX District: 26 |  |  | $\square$ Memo Item |

Full Name (Last, First, Middle Initial)
B. MORAN FOR KANSAS


Full Name (Last, First, Middle Initial)
c. MORAN FOR KANSAS


Date of Disbursement


Transaction ID : SB23.4768

Amount of Each Disbursement this Period
$\square 1000.00$

Memo Item

| SUBTOTAL of Disbursements This Page (optional).................................................. | 4500.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)......................................................... |  |

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



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)
Professional Compounding Centers of America Political Action Committee
Full Name (Last, First, Middle Initial)

| Mailing Address PO BOX 361 |  |  | 04 06 2016 |
| :---: | :---: | :---: | :---: |
| City CHRISTIANSBURG | State Zip Code <br> VA 24068 |  | Transaction ID : SB23.4750 <br> Amount of Each Disbursement this Period |
| Purpose of Disbursement 2016 Primary |  |  |  |
| Candidate Name H MORGAN GRIFFITH |  | Category/ Type | $2500.00$ |
| Office Sought: $X$ House <br> Senate <br> President <br> State: VA District: 09  |  |  | $\square$ Memo Item |

Full Name (Last, First, Middle Initial)
B. SHELBY FOR U S SENATE

| Mailing Address POST OFFICE BOX 1091 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| City <br> TUSCALOOSA |  |  |  | State Zip Code <br> AL 35403 |  |  |  |
|  |  |  |  |  |  |  |  |
| Purpose of Disbursement 2016 General |  |  |  |  |  |  |  |
| Candidate Name RICHARD C SHELBY |  |  |  |  |  |  | Category/ Type |
| Office | ught: AL | XHou <br> Sen <br> Pre |  |  |  |  |  |

Full Name (Last, First, Middle Initial)
c. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

| Mailing Address PO BOX 2485 |  |  |
| :---: | :---: | :---: |
| City | State Zip Code <br> VA 22152 |  |
| SPRINGFIELD |  |  |
| $\begin{aligned} & \text { Purpose of Disbursement } \\ & 2016 \end{aligned}$ |  |  |
| Candidate Name STEVE MR. SCALISE |  | Category/ Type |
| Office Sought: XHouse <br> Senate <br> President <br> State: LA District: 01 |  |  |

Date of Disbursement

Transaction ID : SB23.4750

Date of Disbursement


## Transaction ID : SB23.4805

Amount of Each Disbursement this Period
$\square \quad 1500.00$

[^3]Date of Disbursement

| 04 | $\begin{gathered} D \quad D \\ 06 \end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : SB23.4748

Amount of Each Disbursement this Period
$\square 5000.00$

[^4]| SUBTOTAL of Disbursements This Page (optional)....................................................... | 9000.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only) | 31000.00 |


[^0]:    Memo Item
    Bi-monthly payroll contributions

[^1]:    Memo Item
    Bi-monthly payroll contributions

[^2]:    Memo Item

[^3]:    Memo Item

[^4]:    Memo Item

