

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
Americas PAC

ADDRESS (number and street) 2560 Plymouth
Check if different than previously reported. (ACC) Marion IA 52302

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00559906 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 01 2016 through 06 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tom Donelson

Signature of Treasurer Tom Donelson [Electronically Filed] Date 08 26 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Americas 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="112097.65"/>	<input type="text" value="112097.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17497.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="520700.00"/>	<input type="text" value="530700.00"/>
(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="538197.65"/>	<input type="text" value="642797.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="513946.00"/>	<input type="text" value="618546.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24251.65"/>	<input type="text" value="24251.65"/>
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Americas 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).....	520000.00	530000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	520000.00	530000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	520000.00	530000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	700.00	700.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	520700.00	530700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	520700.00	530700.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	98050.00	132950.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	98050.00	132950.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	415896.00	485596.00
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)) ..	513946.00	618546.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	513946.00	618546.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	520000.00	530000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	520000.00	530000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	98050.00	132950.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	700.00	700.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	97350.00	132250.00

**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 6 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Americas PAC

A. Hawthorne Big Bear LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1304 Hawthorne Lane
 City Hinsdale State IL Zip Code 60521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2016
Transaction ID : SA11AI.4559
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 Contribution

B. Mary Kohler
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 597
 City Sheboygan State WI Zip Code 53082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Windway Capital Corp Public Affairs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.4553
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 Contribution

C. Richard Uihlein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1396 N Waukegan Road
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Uline CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period
 500000.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	520000.00
TOTAL This Period (last page this line number only).....▶	520000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 20
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Americas PAC

A. Full Name (Last, First, Middle Initial)
Beasley Media Group, Inc.

Mailing Address 9721 Executive Center Drive N.
#200

City State Zip Code
St. Petersburg FL 32702

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2016

Transaction ID : SA15.4552

Amount of Each Receipt this Period
700.00

Memo Item
Refund of Overpayment

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	700.00

**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"/> 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)
Americas PAC

Full Name (Last, First, Middle Initial)

A. Tom Donelson

Mailing Address 2560 Plymouth Street

City Marion State IA Zip Code 52302

Purpose of Disbursement
Operational & Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : SB21B.4490

Amount of Each Disbursement this Period

35000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ivan Duin-Obregon

Mailing Address 8315 West 91st Terrace

City Oveland Park State KS Zip Code 66212

Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : SB21B.4501

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Ariana Flores

Mailing Address 8014 West 145 Ter

City Overland Park State KS Zip Code 66223

Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : SB21B.4504

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

36000.00

**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"/> 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)
Americas PAC

Full Name (Last, First, Middle Initial) A. Brad Furnish		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016	
Mailing Address 705 W. 76th Terrace		Transaction ID : SB21B.4491	
City Kansas City	State MO	Zip Code 64114	Amount of Each Disbursement this Period 12000.00
Purpose of Disbursement Media Consulting		Category/ Type	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Brad Furnish		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016	
Mailing Address 705 W. 76th Terrace		Transaction ID : SB21B.4556	
City Kansas City	State MO	Zip Code 64114	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Media Consulting		Category/ Type	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. James Holt		Date of Disbursement MM / DD / YYYY 05 / 06 / 2016	
Mailing Address 410 NE Medford Drive		Transaction ID : SB21B.4500	
City Lees Summit	State MO	Zip Code 64064	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Ad Production		Category/ Type	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional).....	13500.00
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"/> 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)
Americas PAC

Full Name (Last, First, Middle Initial)

A. Barbara LeClerq

Mailing Address 8640 Travis

City Overland Park State KS Zip Code 66212

Purpose of Disbursement
Operational & Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : **SB21B.4497**

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gabriela Lucas

Mailing Address 16160 S Heatherwood St.

City Olathe State KS Zip Code 66062

Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : **SB21B.4503**

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VCreek

Mailing Address 2318 SW Briarwood

City Topeka State KS Zip Code 66611

Purpose of Disbursement
Ad Production

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : **SB21B.4494**

Amount of Each Disbursement this Period

30000.00

Memo Item

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

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

37750.00

**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"/> 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)
Americas PAC

Full Name (Last, First, Middle Initial)

A. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City State Zip Code
Arlington VA 76010

Purpose of Disbursement
Polling - Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : SB21B.4524

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City State Zip Code
Arlington VA 76010

Purpose of Disbursement
Polling - Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SB21B.4545

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City State Zip Code
Arlington VA 76010

Purpose of Disbursement
Polling - Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 18 / 2016

Transaction ID : SB21B.4558

Amount of Each Disbursement this Period

2700.00

Memo Item

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

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

8100.00

**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"/> 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)
Americas PAC

Full Name (Last, First, Middle Initial)

A. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City Arlington State VA Zip Code 76010

Purpose of Disbursement
Polling - Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SB21B.4568

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

2700.00

98050.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC	FEC IDENTIFICATION NUMBER ▼ C C00559906
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee El Sol Broadcasting <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 22 / 2016
Mailing Address 611 W. National Ave.	Amount 16000.00
City State Zip Code Milwaukee WI 53204	Transaction ID : SE.4543 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 18 / 2016
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate RUSSELL DANA FEINGOLD <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 112000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Entravision <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 18 / 2016
Mailing Address 1907 Mile High Stadium West Circle	Amount 119224.00
City State Zip Code Denver CO 80204	Transaction ID : SE.4512 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2016
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate MICHAEL F BENNET <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 119224.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	135224.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Tom Donelson
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC	FEC IDENTIFICATION NUMBER ▼ C C00559906
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Greeley Broadcasting Corp <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 18 / 2016
Mailing Address 800 8th Ave. Suite 304	Amount 8000.00
City State Zip Code Greeley CO 80631	Transaction ID : SE.4514 Date of Disbursement or Obligation 05 / 11 / 2016
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate MICHAEL F BENNET <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 127224.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Kemp Broadcasting <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 06 / 01 / 2016
Mailing Address 3999 Las Vegas Blvd. Suite K	Amount 25600.00
City State Zip Code Las Vegas NV 89119	Transaction ID : SE.4521 Date of Disbursement or Obligation 05 / 14 / 2016
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate MICHAEL F BENNET <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 25600.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	33600.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Tom Donelson [Electronically Filed] Date 08 / 26 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC	FEC IDENTIFICATION NUMBER ▼ C C00559906
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee KRNV-FM <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 18 / 2016
Mailing Address 5700 Wilshire Blvd.	Amount 15232.00
City State Zip Code Los Angeles CA 90065	
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate CATHERINE CORTEZ MASTO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 83232.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Latino Communications Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 18 / 2016
Mailing Address 600 Grant St. #600	Amount 59840.00
City State Zip Code Denver CO 80203	
Purpose of Expenditure Media Purchase	Category/Type
Name of Federal Candidate MICHAEL F BENNET <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 207464.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	75072.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Tom Donelson
Signature

[Electronically Filed] Date 08 / 26 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC
FEC IDENTIFICATION NUMBER C C00559906
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Lotus Broadcasting
Mailing Address 8755 Flamingo
City Las Vegas State NV Zip Code 89147
Purpose of Expenditure Media Purchase
Name of Federal Candidate CATHERINE CORTEZ MASTO
Calendar Year-To-Date Per Election for Office Sought 68000.00
Date of Public Distribution/Dissemination 05/18/2016
Amount 40000.00
Transaction ID : SE.4508
Date of Disbursement or Obligation 05/11/2016
Office Sought: Senate State: NV
Disbursement For: Primary

Full Name of Payee Lotus Broadcasting
Mailing Address 8755 Flamingo
City Las Vegas State NV Zip Code 89147
Purpose of Expenditure Media Purchase
Name of Federal Candidate CATHERINE CORTEZ MASTO
Calendar Year-To-Date Per Election for Office Sought 92832.00
Date of Public Distribution/Dissemination 05/18/2016
Amount 9600.00
Transaction ID : SE.4523
Date of Disbursement or Obligation 05/17/2016
Office Sought: Senate State: NV
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 49600.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Tom Donelson [Electronically Filed] Date 08/26/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC
FEC IDENTIFICATION NUMBER C C00559906

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

Full Name of Payee Salem Media Group
Mailing Address 6400 N. Belt Line Road
City Irving State TX Zip Code 75063
Purpose of Expenditure Media Purchase
Name of Federal Candidate MICHAEL F BENNET
Office Sought: Senate State: CO
Disbursement For: Primary
Amount 20400.00
Transaction ID: SE.4517
Date of Disbursement or Obligation 05/12/2016
Calendar Year-To-Date Per Election for Office Sought 147624.00

Full Name of Payee Univision Radio Las Vegas
Mailing Address 6767 W. Tropicana Ave. Suite 102
City Las Vegas State NV Zip Code 89103
Purpose of Expenditure Media Purchase
Name of Federal Candidate CATHERINE CORTEZ MASTO
Office Sought: Senate State: NV
Disbursement For: Primary
Amount 28000.00
Transaction ID: SE.4505
Date of Disbursement or Obligation 05/11/2016
Calendar Year-To-Date Per Election for Office Sought 28000.00

(a) SUBTOTAL of Itemized Independent Expenditures 48400.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature Tom Donelson [Electronically Filed] Date 08/26/2016

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

NAME OF COMMITTEE (In Full) Americas PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00559906 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee <input type="checkbox"/> Memo Item WDDW	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 22 / 2016 </div>
Mailing Address 1138 South 108th St.	Amount <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 28000.00 </div>
City State Zip Code West Allis WI 53214	Transaction ID : SE.4566 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 </div>
Purpose of Expenditure Media Production Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose RUSSELL DANA FEINGOLD
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 96000.00 </div>	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item WDDW	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 17 / 2016 </div>
Mailing Address 1138 South 108th St.	Amount <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 8400.00 </div>
City State Zip Code West Allis WI 53214	Transaction ID : SE.4557 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 10 / 2016 </div>
Purpose of Expenditure Media Purchase Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose RUSSELL DANA FEINGOLD
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 24000.00 </div>	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 36400.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>

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.

Tom Donelson

 Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

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

NAME OF COMMITTEE (In Full) Americas PAC		FEC IDENTIFICATION NUMBER ▼ C C00559906
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee WGLB		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016
Mailing Address 5183 N. 35th Street			Amount 8000.00
City Milwaukee	State WI	Zip Code 53209	Transaction ID : SE.4487
Purpose of Expenditure Media Purchase	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2016
Name of Federal Candidate RUSSELL DANA FEINGOLD	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: <u>00</u> State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought		68000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee WJMR - FM		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 17 / 2016
Mailing Address 5407 W. Mickinley			Amount 15600.00
City Milwaukee	State WI	Zip Code 53208	Transaction ID : SE.4555
Purpose of Expenditure Media Purchase	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 06 / 09 / 2016
Name of Federal Candidate RUSSELL DANA FEINGOLD	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: <u>00</u> State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought		15600.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	23600.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Tom Donelson
Signature

[Electronically Filed] Date MM / DD / YYYY **08 / 26 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Americas PAC	FEC IDENTIFICATION NUMBER ▼ C C00559906
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee WRRD <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2016
Mailing Address 310 W. Wisconsin Ave. Suite 100	Amount 14000.00
City State Zip Code Milwaukee WI 53203	Transaction ID : SE.4549 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 25 / 2016
Purpose of Expenditure Media Buy	Category/Type
Name of Federal Candidate RUSSELL DANA FEINGOLD <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 126000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose	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) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	14000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	415896.00

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.

Tom Donelson [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2016

Signature _____