





**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Federal Managers Association 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).....	130. -	1,295. -
(ii) Unitemized.....	803.56	6,657.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	933.56	7,952.12
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	933.56	7,952.12
12. Transfers From Affiliated/Other Party Committees.....		
All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	3.84	25.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	937.40	7,977.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	937.40	7,977.59

NON-FEDERAL RECEIPTS



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-  
penditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 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)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

933.56
933.56

7,952.12
7,952.12

NON-FEDERAL CAMPAIGN DISBURSEMENTS

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

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

FOR LINE NUMBER:		PAGE 1 OF 2	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input 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)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Niehaus Patricia		Date of Receipt M M / D D / Y Y Y Y 07 29 2016
Mailing Address 429 Morales Court		Amount of Each Receipt this Period  50.-
City Vacaville, CA	State Zip Code 95688	
FEC ID number of contributing federal political committee. C		
Name of Employer Dept. of Defense	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  935.-	

Full Name (Last, First, Middle Initial) B. Plasse Michelle		Date of Receipt M M / D D / Y Y Y Y 07 29 2016
Mailing Address 9645 Harper Hill Road SE		Amount of Each Receipt this Period  20.-
City Port Orchard, WA	State Zip Code 98366	
FEC ID number of contributing federal political committee. C		
Name of Employer Dept. of Defense	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  300.-	

Full Name (Last, First, Middle Initial) C. Hollingsworth Paul		Date of Receipt M M / D D / Y Y Y Y 07 29 2016
Mailing Address 1 Sterling Hill Lane, Apt. 123		Amount of Each Receipt this Period  20.-
City Exeter, NH	State Zip Code 03833	
FEC ID number of contributing federal political committee. C		
Name of Employer Dept. of Defense	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  300.-	

JBTOTAL of Receipts This Page (optional).....▶

90.-

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

2013-08-01 08:00:00

**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 2 OF 2	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
**Federal Managers Association Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Johnson, Renee**

Mailing Address  
**161 Mills Road**

City **Newport** State **NC** Zip Code **28570**

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

Name of Employer **Dept. of Defense** Occupation **Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.-**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 29 2016**

Amount of Each Receipt this Period  
**20.-**

**B.** Full Name (Last, First, Middle Initial)  
**Kelley, James**

Mailing Address  
**301 Panther Trail**

City **Havelock** State **NC** Zip Code **28532**

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

Name of Employer **Dept. of Defense** Occupation **Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.-**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 29 2016**

Amount of Each Receipt this Period  
**20.-**

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

Amount of Each Receipt this Period

**JBTOTAL** of Receipts This Page (optional)..... **40.-**

**TOTAL** This Period (last page this line number only)..... **130.-**

20160808 08:00 AM

**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)						PAGE 1 OF 1
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Federal Managers Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Hoyer for Congress</b>		Date of Disbursement MM/DD/YYYY <b>07/13/2016</b>
Mailing Address <b>4201 Northview Drive, Suite 307</b>		Amount of Each Disbursement this Period <b>1,500.00</b>
City <b>Bowie, MD 20716</b>	State Zip Code	
Purpose of Disbursement <b>Fundraiser</b>	Candidate Name <b>STENNY HOYER</b>	Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: <b>MD</b>	District: <b>05</b>	

Full Name (Last, First, Middle Initial) <b>B. Gerry Connolly for Congress</b>		Date of Disbursement MM/DD/YYYY <b>07/14/2016</b>
Mailing Address <b>P.O. Box 563</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Merrifield, VA 22116</b>	State Zip Code	
Purpose of Disbursement <b>Fundraiser</b>	Candidate Name <b>GERRY CONNOLLY</b>	Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: <b>VA</b>	District: <b>11</b>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	

<b>TOTAL</b> of Disbursements This Page (optional).....▶	
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>2,500.00</b>

2016-08-15 10:00:00





Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  
Date of Receipt

USPS Registered/Certified Postmarked (R/C)  
8/19/16

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

PREPARER  8/25/16  
DATE PREPARED

(3/2015)

NON-CONFIDENTIAL DOCUMENT