

# 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

RESTORE THE CONSTITUTION COALITION

ADDRESS (number and street) 1624 MARKET STREET  
SUITE 202  
Check if different than previously reported. (ACC) DENVER CO 80202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00584482

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2016 through [MM] / [DD] / [YYYY] 03 / 31 / 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 Alexander Hornaday

Signature of Treasurer Alexander Hornaday [Electronically Filed] Date 04 / 14 / 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.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**RESTORE THE CONSTITUTION COALITION**

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="2615.00"/>	<input type="text" value="2615.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2615.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="44753.06"/>	<input type="text" value="44753.06"/>
(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="47368.06"/>	<input type="text" value="47368.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1608.44"/>	<input type="text" value="1608.44"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45759.62"/>	<input type="text" value="45759.62"/>
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="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)

Write or Type Committee Name

**RESTORE THE CONSTITUTION COALITION**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

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).....	9475.00	9475.00
(ii) Unitemized .....	30278.06	30278.06
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	39753.06	39753.06
(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) .....	39753.06	39753.06
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).....	5000.00	5000.00
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))..... ▶	44753.06	44753.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	44753.06	44753.06

**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 .....	108.44	108.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	108.44	108.44
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) .....	1500.00	1500.00
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)) ..	1608.44	1608.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1608.44	1608.44

**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) .....	39753.06	39753.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39753.06	39753.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	108.44	108.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5000.00	5000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-4891.56	-4891.56



**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 13
	<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	

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)  
**RESTORE THE CONSTITUTION COALITION**

Full Name (Last, First, Middle Initial)  
**A. Kerasotes Denis**

Mailing Address 31 Fairview Ln

City Springfield State IL Zip Code 62711

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

Name of Employer none Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2016  
**Transaction ID : SA11AI.4742**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)  
**B. Littlepage James & Georgia**

Mailing Address PO Box 1326

City Prosper State TX Zip Code 75078

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2016  
**Transaction ID : SA11AI.5501**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)  
**C. Kilic Jan**

Mailing Address 1040 Woodruff Plantation Pkwy

City Marietta State GA Zip Code 30067

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : SA11AI.4372**

Amount of Each Receipt this Period  
 500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**RESTORE THE CONSTITUTION COALITION**

Full Name (Last, First, Middle Initial)  
**A. Robertson John**

Mailing Address 20702 US Highway 23

City Chillicothe State OH Zip Code 45601

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

Name of Employer Infosight Corp Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2016

**Transaction ID : SA11AI.4598**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)  
**B. Moffet Lavanda**

Mailing Address 6520 LA poza Ct

City Citrus Heights State CA Zip Code 95621

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2016

**Transaction ID : SA11AI.5298**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)  
**C. Garrett Leslie**

Mailing Address 94 Ridgeview Trl SE

City Cartersville State GA Zip Code 30120

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

Name of Employer Homemaker/Small Home Business Occupation Custom Home Designs

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2016

**Transaction ID : SA11AI.4380**

Amount of Each Receipt this Period  
 25.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

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NAME OF COMMITTEE (In Full)  
**RESTORE THE CONSTITUTION COALITION**

**A. Hoots Marti**  
Full Name (Last, First, Middle Initial)

Mailing Address Box 36

City Deeth State NV Zip Code 89823

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

Name of Employer self Occupation self

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2016

**Transaction ID : SA11AI.5202**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

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

Mailing Address 18 Wimbledon Dr

City Dover State DE Zip Code 19904

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

Name of Employer Self Occupation Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.4231**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

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

Mailing Address 1017 Avenue A

City Farwell State TX Zip Code 79325

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2016

**Transaction ID : SA11AI.5034**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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: PAGE 10 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**RESTORE THE CONSTITUTION COALITION**

Full Name (Last, First, Middle Initial)  
**A. vonRosenberg Peter**

Mailing Address 507 Angus Dr

City Columbia State SC Zip Code 29223

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

Name of Employer Computer Sciences Corporation Occupation Computer Programmer

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2016  
**Transaction ID : SA11AI.4333**

Amount of Each Receipt this Period  
 250.00

Memo Item  
Contribution

Full Name (Last, First, Middle Initial)  
**B. Davis Philip**

Mailing Address 11655 Gold Country Blvd

City Gold River State CA Zip Code 95670

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

Name of Employer N/A Occupation retired

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2016  
**Transaction ID : SA11AI.5302**

Amount of Each Receipt this Period  
 250.00

Memo Item  
Contribution

Full Name (Last, First, Middle Initial)  
**C. Gazmuri Raul**

Mailing Address 505 N Lake Shore Dr Apt 3503

City Chicago State IL Zip Code 60611

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

Name of Employer Federal Health Care Centrer Occupation Physician

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2016  
**Transaction ID : SA11AI.4728**

Amount of Each Receipt this Period  
 250.00

Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 13
	<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

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NAME OF COMMITTEE (In Full)  
**RESTORE THE CONSTITUTION COALITION**

Full Name (Last, First, Middle Initial) <b>A. Brown Rob A. and Talley</b>			Date of Receipt MM / DD / YYYY 02 / 26 / 2016 <b>Transaction ID : SA11AI.5032</b>
Mailing Address PO Box 1196			Amount of Each Receipt this Period 5000.00
City Stinnett	State TX	Zip Code 79083	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer self - employed	Occupation Ranching / Beef Industry	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Morrison Robert</b>			Date of Receipt MM / DD / YYYY 01 / 02 / 2016 <b>Transaction ID : SA11AI.4513</b>
Mailing Address 501 Rock House Ct			Amount of Each Receipt this Period 250.00
City Signal Mountain	State TN	Zip Code 37377	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer MSA, Inc.	Occupation Partner	Aggregate Year-to-Date ▼ 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Bayne Susan</b>			Date of Receipt MM / DD / YYYY 02 / 25 / 2016 <b>Transaction ID : SA11AI.5014</b>
Mailing Address 12 Tanner Woods			Amount of Each Receipt this Period 200.00
City San Antonio	State TX	Zip Code 78248	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation N/A	Aggregate Year-to-Date ▼ 400.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9475.00

**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 13  
(check only one)

<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)  
**RESTORE THE CONSTITUTION COALITION**

**A. Amagi Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 424 E 10th St  
4D  
City New York State NY Zip Code 10009

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 04 / 2016  
**Transaction ID : SA15.5520**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Refund for Consulting Services

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

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

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

**TOTAL** This Period (last page this line number only)..... ▶ 5000.00

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

NAME OF COMMITTEE (In Full) <b>RESTORE THE CONSTITUTION COALITION</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00584482
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>Amagi Strategies</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 29 / 2016
Mailing Address 424 E 10th St 4D	Amount <span style="border: 1px solid black; padding: 2px;">1500.00</span>
City State Zip Code New York NY 10009	Transaction ID : <b>SE.5522</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 28 / 2016
Purpose of Expenditure Digital Advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1500.00</span>	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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address	Amount <span style="border: 1px solid black; padding: 2px;"></span>
City State Zip Code	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>
Name of Federal Candidate	Office Sought: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1500.00</span>

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.

*Alexander Hornaday* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
04 / 14 / 2016

Signature \_\_\_\_\_