

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

LONGHORN 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="2015"/>		10671.86
(b) Cash on Hand at Beginning of Reporting Period.....	6690.72	
(c) Total Receipts (from Line 19)	29100	113600
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35790.72	124271.86
7. Total Disbursements (from Line 31).....	22589.75	111070.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13200.97	13200.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5000	

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

LONGHORN 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).....	600	25600
(ii) Unitemized	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	600	25600
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	28500	88000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	29100	113600
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	29100	113600
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	29100	113600

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	21589.75	101070.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21589.75	101070.89
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000	10000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22589.75	111070.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22589.75	111070.89

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)	29100	113600
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29100	113600
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21589.75	101070.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21589.75	101070.89

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

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

FOR LINE NUMBER: PAGE 6 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
LONGHORN PAC

A. Peter Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 9510 Blythe Dale Court
 City Vienna State VA Zip Code 22182-3361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Deloitte Occupation Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : 1532-2563-c
 Amount of Each Receipt this Period
 600

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

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

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
<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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)
A. iHeartmedia, Inc. - Clear Channel Outdoor PAC

Mailing Address 200 E Basse Road

City San Antonio State TX Zip Code 78209-8328

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2015

Transaction ID : 1533-2568-c

Amount of Each Receipt this Period
2500

Full Name (Last, First, Middle Initial)
B. Marathon Petroleum Corporation Employees PAC

Mailing Address 539 South Main Street

City Findlay State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2015

Transaction ID : 1438-2570-c

Amount of Each Receipt this Period
2500

Full Name (Last, First, Middle Initial)
C. Twenty First Century Fox, Inc. PAC (FOX PAC)

Mailing Address 400 North Capital Street NW
Suite 890

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00330019**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2015

Transaction ID : 176-2569-c

Amount of Each Receipt this Period
5000

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 8 OF 18
<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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)
A. National Multi Housing Council (NMHC) PAC

Mailing Address 1850 M Street NW
Suite 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000

Date of Receipt
09 / 18 / 2015
Transaction ID : 1450-2575-c

Amount of Each Receipt this Period
5000

Full Name (Last, First, Middle Initial)
B. Orbital ATK Inc. Political Action Committee

Mailing Address 1300 Wilson Boulevard
Suite 1100

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt
09 / 18 / 2015
Transaction ID : 1537-2574-c

Amount of Each Receipt this Period
1000

Full Name (Last, First, Middle Initial)
c. Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500

Date of Receipt
09 / 28 / 2015
Transaction ID : 154-2578-c

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 9 OF 18
<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)
LONGHORN PAC

A. International Council of Shopping Centers Political Action Committee (ICSC-PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 12th Street NW
 Suite 660
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00217638
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 887-2580-c
 Amount of Each Receipt this Period
 5000

B. KPMG Partners/Principals & Employees Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 18254
 City Washington State DC Zip Code 20036-8254
 FEC ID number of contributing federal political committee. **C** C00280222
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 926-2581-c
 Amount of Each Receipt this Period
 5000

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
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	28500.00

**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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. Nike, Inc.

Mailing Address 1111 19th Street NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
PAC Gifts & Mementos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

006
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-1531-2562-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Complete Campaigns

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Software Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-477-2567-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
SEE MEMO ITEMS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-956-2572-e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. Craft

Mailing Address 43 East 19th Street

City New York State NY Zip Code 10003

Purpose of Disbursement
PAC Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-1527-524-V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of American Express (09/17/15)

Full Name (Last, First, Middle Initial)

B. Gramercy Park Hotel

Mailing Address 2 Lexington Avenue

City New York State NY Zip Code 10010

Purpose of Disbursement
PAC Lodging

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-1536-527-V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of American Express (09/17/15)

Full Name (Last, First, Middle Initial)

C. Eatly

Mailing Address 200 5th Avenue

City New York State NY Zip Code 10010

Purpose of Disbursement
PAC Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-1528-525-V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of American Express (09/17/15)

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LONGHORN PAC

A. Regal Carriage Service

Full Name (Last, First, Middle Initial)

Mailing Address 18 West 33rd Street

City New York State NY Zip Code 10001-3300

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 17 / 2015

Transaction ID : SB21B-232-526-V

Amount of Each Disbursement this Period 2156.46

[MEMO ITEM]
Subitemization of American Express (09/17/15)

B. United States Tennis Association

Full Name (Last, First, Middle Initial)

Mailing Address 70 West Red Oak Lane

City White Plains State NY Zip Code 10604

Purpose of Disbursement PAC Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 17 / 2015

Transaction ID : SB21B-1237-523-V

Amount of Each Disbursement this Period 2762.56

[MEMO ITEM]
Subitemization of American Express (09/17/15)

C. Campaign Financial Services

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 24 / 2015

Transaction ID : SB21B-576-2565-e

Amount of Each Disbursement this Period 550

SUBTOTAL of Disbursements This Page (optional)..... ▶ 550.00

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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement
PAC General Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-529-V

Amount of Each Disbursement this Period

50

[MEMO ITEM]

Subitemization of Campaign Financial Services (09/24/15)

Full Name (Last, First, Middle Initial)

B. Campaign Financial Services

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement
PAC Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-528-V

Amount of Each Disbursement this Period

500

[MEMO ITEM]

Subitemization of Campaign Financial Services (09/24/15)

Full Name (Last, First, Middle Initial)

C. Campaign Financial Services

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-2576-e

Amount of Each Disbursement this Period

572.5

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

572.50

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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City State Zip Code
Bethesda MD 20824-0844

Purpose of Disbursement
PAC Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-530-V

Amount of Each Disbursement this Period

500

[MEMO ITEM]

Subitemization of Campaign Financial Services (09/24/15)

Full Name (Last, First, Middle Initial)

B. Campaign Financial Services

Mailing Address PO Box 30844

City State Zip Code
Bethesda MD 20824-0844

Purpose of Disbursement
PAC E-Merchant Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-531-V

Amount of Each Disbursement this Period

22.5

[MEMO ITEM]

Subitemization of Campaign Financial Services (09/24/15)

Full Name (Last, First, Middle Initial)

C. Campaign Financial Services

Mailing Address PO Box 30844

City State Zip Code
Bethesda MD 20824-0844

Purpose of Disbursement
PAC General Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB21B-576-532-V

Amount of Each Disbursement this Period

50

[MEMO ITEM]

Subitemization of Campaign Financial Services (09/24/15)

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

0.00

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

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)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. Epiphany Productions

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement
SEE MEMO ITEMS

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-213-2566-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Epiphany Productions

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement
PAC Fundraising Consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-213-533-V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of Epiphany Productions (09/24/15)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
LONGHORN PAC

A. Poliquin for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 50

City: Oakland State: ME Zip Code: 04963

Purpose of Disbursement: PAC Political Contribution

Candidate Name: **Bruce Poliquin**

Office Sought: House Senate President
State: ME District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 25 / 2015

Transaction ID : **SB23-1539-2577-e**

Amount of Each Disbursement this Period: 1000

Category/Type: 011

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶ 1000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LONGHORN PAC

Full Name (Last, First, Middle Initial)

A. United States Tennis Association (USTA) Foundation

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Mailing Address 70 West Red Oak Lane

Transaction ID : SB29-1535-522-V

City State Zip Code
White Plains NY 10604

Amount of Each Disbursement this Period

600

Purpose of Disbursement
PAC Charitable Donation

012
Category/ Type

Candidate Name

[MEMO ITEM]

Subitemization of American Express (09/17/15)

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

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

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

0.00

0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 18
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LONGHORN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Epiphany Productions	Nature of Debt (Purpose): Administrative/Salary/Overhead: SEE MEMO ITEMS
Mailing Address 104 Hume Avenue	
City State Zip Code Alexandria VA 22301-1015	

Outstanding Balance Beginning This Period 5022.89	Transaction ID : SD10-DEBT2566	
Amount Incurred This Period 0	Payment This Period 5022.89	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Epiphany Productions	Nature of Debt (Purpose): Fundraising: PAC Fundraising Consulting
Mailing Address 104 Hume Avenue	
City State Zip Code Alexandria VA 22301-1015	

Outstanding Balance Beginning This Period 0	Transaction ID : SD10-DEBT2579	
Amount Incurred This Period 5000	Payment This Period 0	Outstanding Balance at Close of This Period 5000

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Financial Services	Nature of Debt (Purpose): Administrative/Salary/Overhead: SEE MEMO ITEMS
Mailing Address PO Box 30844	
City State Zip Code Bethesda MD 20824-0844	

Outstanding Balance Beginning This Period 550	Transaction ID : SD10-DEBT2565	
Amount Incurred This Period 0	Payment This Period 550	Outstanding Balance at Close of This Period 0

1) SUBTOTALS This Period This Page (optional)..... ▶	5000.00
2) TOTALS This Period (last page this line number only)..... ▶	5000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5000.00