

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

Unlocking Potential PAC

ADDRESS (number and street) 1390 CHAIN BRIDGE ROAD #515

Check if different than previously reported. (ACC) MCLEAN VA 22101

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

C C00564534

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

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

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

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

5. Covering Period [MM] / [DD] / [YYYY] 04 / 01 / 2016 through [MM] / [DD] / [YYYY] 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 Cabell Hobbs

Signature of Treasurer Cabell Hobbs [Electronically Filed] Date 07 / 13 / 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

Unlocking Potential 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="452.51"/>	<input type="text" value="452.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="77257.71"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20000.00"/>	<input type="text" value="202643.50"/>
(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="97257.71"/>	<input type="text" value="203096.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21766.81"/>	<input type="text" value="127605.11"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75490.90"/>	<input type="text" value="75490.90"/>
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)

Write or Type Committee Name

Unlocking Potential 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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	22000.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	20000.00	180643.50
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))..... ▶	20000.00	202643.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20000.00	202643.50

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	21766.81	127605.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21766.81	127605.11
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)	0.00	0.00
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)) ..	21766.81	127605.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21766.81	127605.11

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)	0.00	22000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	22000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21766.81	127605.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21766.81	127605.11

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 30	
(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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" 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)
Unlocking Potential PAC

A. CARLY FOR AMERICA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 25674

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00610568

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

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

Transaction ID : SA17.29507

Amount of Each Receipt this Period
20000.00

Memo Item
NON CONTRIBUTION ACCOUNT

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).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	20000.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 2300WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2016

Transaction ID : SB21B.12362

Amount of Each Disbursement this Period

69.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 2300WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

Transaction ID : SB21B.12363

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 2300WILSON BLVD SUITE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2016

Transaction ID : SB21B.12365

Amount of Each Disbursement this Period

18.00

Memo Item

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

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

92.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES

Mailing Address PO BOX 15153

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.12361**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 50 MASSACHURSETTS AVE NW

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21BUV.89903**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 50 MASSACHURSETTS AVE NW

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21BUV.89912**

Amount of Each Disbursement this Period

Memo Item

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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 50 MASSACHURSETTS AVE NW

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89929

Amount of Each Disbursement this Period

476.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 3725-C JEFFERSON DAVIS HIGHWAY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89946

Amount of Each Disbursement this Period

476.99

Memo Item

Full Name (Last, First, Middle Initial)

C. BARLEY HOUSE RESTAURANT

Mailing Address 132 N MAIN STREET

City CONCORD State NH Zip Code 03301

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89902

Amount of Each Disbursement this Period

452.98

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. BRASSERIE GIGI

Mailing Address 102 N MARLET STREET

City CHARLESTON State SC Zip Code 29401

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89947

Amount of Each Disbursement this Period

308.22

Memo Item

Full Name (Last, First, Middle Initial)

B. BUDGET

Mailing Address 3206 10TH STREET N

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89943

Amount of Each Disbursement this Period

211.18

Memo Item

Full Name (Last, First, Middle Initial)

C. CAREY INTERNATIONAL

Mailing Address 4530 WISCONSIN AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89906

Amount of Each Disbursement this Period

645.94

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)
A. COMAST

Mailing Address PO BOX 660618

City DALLAS State TX Zip Code 75266

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89963**

Amount of Each Disbursement this Period: 478.27

Memo Item

Full Name (Last, First, Middle Initial)
B. COPPER DOOR LLC

Mailing Address 15 LEAVY DRIVE

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89901**

Amount of Each Disbursement this Period: 588.60

Memo Item

Full Name (Last, First, Middle Initial)
C. COURTYARD BY MARRIOTT

Mailing Address 2602 FORTUNE CIRCLE EAST

City INDIANAPOLIS State IN Zip Code 46241

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89927**

Amount of Each Disbursement this Period: 211.51

Memo Item

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

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NAME OF COMMITTEE (In Full)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. COURTYARD BY MARRIOTT

Mailing Address 2602 FORTUNE CIRCLE EAST

City INDIANAPOLIS State IN Zip Code 46241

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89928

Amount of Each Disbursement this Period

218.19

Memo Item

Full Name (Last, First, Middle Initial)

B. DC PROMPTERS LLC

Mailing Address 3136 63RD AVENUE

City CHEVERLY State MD Zip Code 20785

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89910

Amount of Each Disbursement this Period

450.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address PO BOX 20706

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89923

Amount of Each Disbursement this Period

434.10

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address PO BOX 20706

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89926

Amount of Each Disbursement this Period

434.10

Memo Item

Full Name (Last, First, Middle Initial)

B. DOUBLETREE

Mailing Address 120 WEST MARKET STREET

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89941

Amount of Each Disbursement this Period

328.02

Memo Item

Full Name (Last, First, Middle Initial)

C. DOUBLETREE

Mailing Address 120 WEST MARKET STREET

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89944

Amount of Each Disbursement this Period

244.03

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. DOUBLETREE

Mailing Address 120 WEST MARKET STREET

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89945

Amount of Each Disbursement this Period

271.16

Memo Item

Full Name (Last, First, Middle Initial)

B. FRONTIER

Mailing Address 7001 TOWER ROAD

City DENVER State CO Zip Code 80249

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89904

Amount of Each Disbursement this Period

192.10

Memo Item

Full Name (Last, First, Middle Initial)

C. GATEWAY HOTEL & CONFERENCE

Mailing Address 2100 GREEN HILLS DRIVE

City AMES State IA Zip Code 50014

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89918

Amount of Each Disbursement this Period

268.57

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. GATEWAY HOTEL & CONFERENCE

Mailing Address 2100 GREEN HILLS DRIVE

City State Zip Code
AMES IA 50014

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89919

Amount of Each Disbursement this Period

122.08

Memo Item

Full Name (Last, First, Middle Initial)

B. HILTON HOTELS

Mailing Address 7930 JONES BRANCH DRIVE

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89899

Amount of Each Disbursement this Period

390.21

Memo Item

Full Name (Last, First, Middle Initial)

C. MARRIOTT WEST DES MOINES

Mailing Address 700 GRAND AVE

City State Zip Code
DES MOINES IA 50309

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89907

Amount of Each Disbursement this Period

439.78

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. MARRIOTT WEST DES MOINES

Mailing Address 700 GRAND AVE

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89908**

Amount of Each Disbursement this Period

439.78

Memo Item

Full Name (Last, First, Middle Initial)

B. MARRIOTT WEST DES MOINES

Mailing Address 700 GRAND AVE

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89924**

Amount of Each Disbursement this Period

257.88

Memo Item

Full Name (Last, First, Middle Initial)

C. MARRIOTT WEST DES MOINES

Mailing Address 700 GRAND AVE

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89925**

Amount of Each Disbursement this Period

281.23

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)
A. NH GOP

Mailing Address 10 WATER STREET

City CONCORD State NH Zip Code 03301

Purpose of Disbursement REGISTRATION FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89948**

Amount of Each Disbursement this Period: 399.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RESIDENCE INN DAVENPORT

Mailing Address 120 E 55TH STREET

City DAVENPORT State IA Zip Code 52806

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89911**

Amount of Each Disbursement this Period: 160.16

Memo Item

Full Name (Last, First, Middle Initial)
C. RESIDENCE INN DAVENPORT

Mailing Address 120 E 55TH STREET

City DAVENPORT State IA Zip Code 52806

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89913**

Amount of Each Disbursement this Period: 160.16

Memo Item

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

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NAME OF COMMITTEE (In Full)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. SOUTHWEST

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89959

Amount of Each Disbursement this Period

604.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 3301 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89961

Amount of Each Disbursement this Period

23.31

Memo Item

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 3301 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89962

Amount of Each Disbursement this Period

232.83

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89898**

Amount of Each Disbursement this Period

127.30

Memo Item

Full Name (Last, First, Middle Initial)

B. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89900**

Amount of Each Disbursement this Period

214.85

Memo Item

Full Name (Last, First, Middle Initial)

C. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89905**

Amount of Each Disbursement this Period

132.29

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89909

Amount of Each Disbursement this Period

120.60

Memo Item

Full Name (Last, First, Middle Initial)

B. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89930

Amount of Each Disbursement this Period

125.59

Memo Item

Full Name (Last, First, Middle Initial)

C. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89931

Amount of Each Disbursement this Period

171.30

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89933

Amount of Each Disbursement this Period

170.85

Memo Item

Full Name (Last, First, Middle Initial)

B. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89934

Amount of Each Disbursement this Period

125.59

Memo Item

Full Name (Last, First, Middle Initial)

C. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SB21BUV.89935

Amount of Each Disbursement this Period

132.29

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. SWIFT LIMOS LLC

Mailing Address 2701 PARK CENTER DRIVE

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89942

Amount of Each Disbursement this Period

176.55

Memo Item

Full Name (Last, First, Middle Initial)

B. THE HOTEL PORTSMOUTH

Mailing Address 40 COURT STREET

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89920

Amount of Each Disbursement this Period

207.09

Memo Item

Full Name (Last, First, Middle Initial)

C. THE HOTEL PORTSMOUTH

Mailing Address 40 COURT STREET

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89921

Amount of Each Disbursement this Period

152.59

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. THE HOTEL PORTSMOUTH

Mailing Address 40 COURT STREET

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
TRAVEL

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
04 / 13 / 2016

Transaction ID : SB21BUV.89922

Amount of Each Disbursement this Period

141.69

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

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
04 / 13 / 2016

Transaction ID : SB21BUV.89914

Amount of Each Disbursement this Period

657.10

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

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
04 / 13 / 2016

Transaction ID : SB21BUV.89915

Amount of Each Disbursement this Period

657.10

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

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
0	4		1	3		2	0	1	6

Transaction ID : SB21BUV.89916

Amount of Each Disbursement this Period

6	5	7	.	1	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

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
0	4		1	3		2	0	1	6

Transaction ID : SB21BUV.89917

Amount of Each Disbursement this Period

6	5	7	.	1	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

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
0	4		1	3		2	0	1	6

Transaction ID : SB21BUV.89936

Amount of Each Disbursement this Period

2	4	.	0	0
---	---	---	---	---

Memo Item

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

0	.	0	0
---	---	---	---

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

0	.	0	0
---	---	---	---

**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)
Unlocking Potential PAC

A. UNITED

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

Transaction ID : **SB21BUV.89937**

Amount of Each Disbursement this Period: 19.00

Memo Item

B. UNITED

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

Transaction ID : **SB21BUV.89938**

Amount of Each Disbursement this Period: 27.00

Memo Item

C. UNITED

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2016

Transaction ID : **SB21BUV.89939**

Amount of Each Disbursement this Period: 298.60

Memo Item

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

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NAME OF COMMITTEE (In Full)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89940**

Amount of Each Disbursement this Period

298.60

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89949**

Amount of Each Disbursement this Period

19.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89950**

Amount of Each Disbursement this Period

208.60

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. UNITED

Mailing Address PO BOX 4607

City HOUSTON State TX Zip Code 77210

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89960

Amount of Each Disbursement this Period

208.60

Memo Item

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89932

Amount of Each Disbursement this Period

210.10

Memo Item

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89951

Amount of Each Disbursement this Period

393.10

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89952**

Amount of Each Disbursement this Period

143.10

Memo Item

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89953**

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : **SB21BUV.89954**

Amount of Each Disbursement this Period

393.10

Memo Item

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

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

0.00

**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)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89955

Amount of Each Disbursement this Period

18.00

Memo Item

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89956

Amount of Each Disbursement this Period

390.10

Memo Item

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21BUV.89957

Amount of Each Disbursement this Period

15.00

Memo Item

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

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NAME OF COMMITTEE (In Full)
Unlocking Potential PAC

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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
04 / 13 / 2016

Transaction ID : **SB21BUV.89958**

Amount of Each Disbursement this Period

390.10

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2632 MARINES WAY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
SUBSCRIPTION

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
04 / 07 / 2016

Transaction ID : **SB21B.12360**

Amount of Each Disbursement this Period

26.95

Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2632 MARINES WAY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
SUBSCRIPTION

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
06 / 02 / 2016

Transaction ID : **SB21B.12364**

Amount of Each Disbursement this Period

26.95

Memo Item

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

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

53.90

21766.81