

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**
MADISON PROJECT INC.

ADDRESS (number and street) **PO BOX 655**
 Check if different than previously reported. (ACC) **ALEDO TX 76008**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00298000 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2016 through / / 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 **KILGORE, PAUL, A, ,**

Signature of Treasurer **KILGORE, PAUL, A, ,** [Electronically Filed] Date / / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MADISON PROJECT INC.

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="19305.16"/>	<input type="text" value="19305.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="40701.33"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6504.68"/>	<input type="text" value="586633.30"/>
(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="47206.01"/>	<input type="text" value="605938.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35625.52"/>	<input type="text" value="594357.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11580.49"/>	<input type="text" value="11580.49"/>
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

Write or Type Committee Name

MADISON PROJECT INC.

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).....	2967.00	125605.00
(ii) Unitemized	3537.68	199777.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6504.68	325382.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6504.68	325382.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	1122.28
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	128.29
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	260000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6504.68	586633.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6504.68	586633.30

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	23901.47	326622.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23901.47	326622.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-500.00	36991.00
24. Independent Expenditures (use Schedule E)	4812.05	109114.60
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	250.00	2145.00
(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)).....	250.00	2145.00
29. Other Disbursements (Including Non-Federal Donations).....	7162.00	119484.67
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	35625.52	594357.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35625.52	594357.97

DETAILED SUMMARY PAGE
of Disbursements

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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)	6504.68	325382.73
34. Total Contribution Refunds (from Line 28(d))	250.00	2145.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6254.68	323237.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23901.47	326622.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	128.29
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23901.47	326494.41

**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 29
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. BAUGHMAN, JO ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1269
 City PHILOMATH State OR Zip Code 97370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 12 / 21 / 2016
Transaction ID : SA11AI.386539
 Amount of Each Receipt this Period 41.00
 Memo Item

B. BAUGHMAN, JO ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1269
 City PHILOMATH State OR Zip Code 97370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt 12 / 29 / 2016
Transaction ID : SA11AI.386546
 Amount of Each Receipt this Period 59.00
 Memo Item

C. COCO, GREGORY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2703 LUCKETTS LN
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERY AND SOLUTIONS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 27 / 2016
Transaction ID : SA11AI.386487
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. COURT, ANITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 HERMITAGE CIR

City LIGONIER	State PA	Zip Code 15658
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386593

Amount of Each Receipt this Period
50.00

Memo Item

B. COX, DORTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4900 MORRIS LN

City OKLAHOMA CITY	State OK	Zip Code 73112
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386587

Amount of Each Receipt this Period
15.00

Memo Item

C. CROSS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 655 W VALLE DEL ORO RD

City TUCSON	State AZ	Zip Code 85737
----------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386585

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.00
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:	PAGE 8 OF 29
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. DOCTER, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7778 BOCA RATON DR
 City LAS VEGAS State NV Zip Code 89113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : SA11AI.386544
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FINLAY, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LA CERRA CIR
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.386617
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. JACKSON, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 SHAY CT
 City HIGHLAND State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : SA11AI.386511
 Amount of Each Receipt this Period
 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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:	PAGE 9 OF 29
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. KENDALL, LINDA, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 HILL ROAD
 City NOVATO State CA Zip Code 94947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.386621
 Amount of Each Receipt this Period 500.00
 Memo Item

B. KIEWIT, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 KIMBERLEY DR
 City LAUREL State MS Zip Code 39440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FORESTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1135.00

Date of Receipt 12 / 27 / 2016
Transaction ID : SA11AI.386513
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KUBIN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 BLOUNT ST
 City HOUSTON State TX Zip Code 77008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 12 / 27 / 2016
Transaction ID : SA11AI.386507
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 10 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. LEWIS, VERNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 E SANTA CRUZ DR

City GOODYEAR	State AZ	Zip Code 85338
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERN LEWIS WELDING SUPPLY	Occupation (for Individual) PRESIDENT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386635

Amount of Each Receipt this Period
25.00

Memo Item

B. MARION, DAVID, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10276 N DOWLING RD

City COLLEGE STATION	State TX	Zip Code 77845
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386606

Amount of Each Receipt this Period
100.00

Memo Item

C. MARSHALL, HELEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 827 SUSAN AVE

City WOODSTOCK	State VA	Zip Code 22664
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.386572

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. MCDONALD, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1898 HENDERSHOT RD
 City PARMA State MI Zip Code 49269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2016
Transaction ID : SA11AI.386465
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. OLIVER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 373
 City CENTER POINT State TX Zip Code 78010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : SA11AI.386490
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. SCHLECH, BARRY, A, DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3550 COUNTRY VISTA DRIVE
 City BURLESON State TX Zip Code 76028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PHARMACEUTICAL MICROBIOLOGIS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 718.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2016
Transaction ID : SA11AI.386545
 Amount of Each Receipt this Period
 112.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	437.00
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 12 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. THOMAS, SARA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address 177 N HIGHLAND ST APT 4207		Transaction ID : SA11AI.386602
City MEMPHIS	State TN	Zip Code 38111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VALERIUS, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address 1909 CANTERBURY ST		Transaction ID : SA11AI.386608
City IRVING	State TX	Zip Code 75062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEEKS, ANNIE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address 3411 ROCK LN		Transaction ID : SA11AI.386565
City IRONDALE	State AL	Zip Code 35210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 445.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 13 OF 29
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. WINTER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7712 APPLE MILL PL
 City LOUISVILLE State KY Zip Code 40228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.386596
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WISE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6013 GREENLEAF CT
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt **12 / 21 / 2016**
Transaction ID : SA11AI.386535
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WISE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6013 GREENLEAF CT
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt **12 / 21 / 2016**
Transaction ID : SA11AI.386536
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
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: PAGE 14 OF 29
(check only one)

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WISE, ROBERT, H., , JR.

Mailing Address 2348 RIVER GRAND DR

City VESTAVIA	State AL	Zip Code 35243
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

Transaction ID : SA11AL386577

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	2967.00

**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"/> 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)
MADISON PROJECT INC.

A. A3K ADVERTISING INC.

Full Name (Last, First, Middle Initial)

Mailing Address 1101 WAYLAND DR

City ARLINGTON State TX Zip Code 76012

Purpose of Disbursement PAC WEBSITE MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38648

Amount of Each Disbursement this Period: 125.00

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address THIRD STREET, SUITE 2B

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement PAC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38647

Amount of Each Disbursement this Period: 58.33

Memo Item

C. AT&T INC.

Full Name (Last, First, Middle Initial)

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PAC TELEPHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38652

Amount of Each Disbursement this Period: 149.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 332.43

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"/> 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)
MADISON PROJECT INC.

A. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38644

Amount of Each Disbursement this Period: 30.00

Memo Item

B. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38644

Amount of Each Disbursement this Period: 30.00

Memo Item

C. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38644

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

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"/> 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)
MADISON PROJECT INC.

A. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement PAC BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38647

Amount of Each Disbursement this Period: 30.00

Memo Item

B. BEH DIRECT

Full Name (Last, First, Middle Initial)

Mailing Address 600 CLARIDEN RANCH ROAD

City SOUTHLAKE State TX Zip Code 76092

Purpose of Disbursement PAC DIRECT MAIL PRODUCTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38644

Amount of Each Disbursement this Period: 4051.02

Memo Item

C. ELECTEK

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 23715

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement PAC SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38644

Amount of Each Disbursement this Period: 600.00

Memo Item

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

4681.02

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"/> 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial) A. INSIGHTPOOL LLC		Date of Disbursement MM / DD / YYYY 12 / 09 / 2016
Mailing Address 3495 PIEDMONT ROAD STE. 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.38647 Amount of Each Disbursement this Period 3722.98
City ATLANTA	State GA	Zip Code 30305
Purpose of Disbursement PAC EMAIL MARKETING		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MAILCHIMP		Date of Disbursement MM / DD / YYYY 12 / 12 / 2016
Mailing Address 512 MEANS ST NW STE 404		FEC Identification Number C [REDACTED] Transaction ID : SB21B.38648 Amount of Each Disbursement this Period 210.00
City ATLANTA	State GA	Zip Code 30318
Purpose of Disbursement PAC E-MARKETING		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MEDIA TEMPLE		Date of Disbursement MM / DD / YYYY 12 / 14 / 2016
Mailing Address 8520 NATIONAL BLVD BLDG A		FEC Identification Number C [REDACTED] Transaction ID : SB21B.38648 Amount of Each Disbursement this Period 60.00
City CULVER CITY	State CA	Zip Code 90232
Purpose of Disbursement PAC WEB HOSTING		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

3992.98

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"/> 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)
MADISON PROJECT INC.

A. PAYCHEX

Full Name (Last, First, Middle Initial)

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAC PAYROLL SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38643

Amount of Each Disbursement this Period: 181.89

Memo Item

B. PAYCHEX

Full Name (Last, First, Middle Initial)

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAC PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38643

Amount of Each Disbursement this Period: 1502.02

Memo Item

C. PAYCHEX

Full Name (Last, First, Middle Initial)

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAC PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.38653

Amount of Each Disbursement this Period: 1502.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3185.93

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"/> 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAC PAYROLL SERVICE FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38653

Amount of Each Disbursement this Period

[REDACTED] 181.89

Memo Item

Full Name (Last, First, Middle Initial)

B. RYUN, JIM, , ,

Mailing Address 132 D ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC STAFF SALARY

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38643

Amount of Each Disbursement this Period

[REDACTED] 3880.48

Memo Item

Full Name (Last, First, Middle Initial)

C. RYUN, JIM, , ,

Mailing Address 132 D ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
SEE MEMO

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38648

Amount of Each Disbursement this Period

[REDACTED] 69.95

Memo Item

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

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

[REDACTED] 4132.32

[REDACTED]

**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"/> 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 900 MICHIGAN AVE NE

City
WASHINGTON

State
DC

Zip Code
20017

Purpose of Disbursement
PAC INTERNET SERVICE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38648

Amount of Each Disbursement this Period

[REDACTED]	69.95
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

B. RYUN, JIM, , ,

Mailing Address 132 D ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAC STAFF SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			30			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38653

Amount of Each Disbursement this Period

[REDACTED]	3880.48
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

C. SARATOGA STRATEGIES LLC

Mailing Address 1550 OLD ANNETTA ROAD

City
ALEDO

State
TX

Zip Code
76008

Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.38648

Amount of Each Disbursement this Period

[REDACTED]	504.21
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Memo Item

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

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

[REDACTED]	4384.69
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[REDACTED]	
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**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"/> 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)
A. SHAFER, KRISTOFFER, L., ,

Mailing Address 2420 VIA BOLOGNA
APT. 2428

City FORT WORTH State TX Zip Code 76109

Purpose of Disbursement
PAC STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.38645
Amount of Each Disbursement this Period
2000.00

Memo Item

B. STRIPE

Full Name (Last, First, Middle Initial)

Mailing Address 185 BERRY ST. STE. 550

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PAC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.38647
Amount of Each Disbursement this Period
33.30

Memo Item

C. THOMAS GRAPHICS INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 14226

City AUSTIN State TX Zip Code 78714

Purpose of Disbursement
PAC POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.38643
Amount of Each Disbursement this Period
1071.00

Memo Item

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

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

3104.30

**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"/> 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL OFFICE

Mailing Address 220 N HATCHER AVE

City **PURCELLVILLE** State **VA** Zip Code **20132**

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 22 / 2016

FEC Identification Number
C
Transaction ID : SB21B.38655
Amount of Each Disbursement this Period
6.45

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES POSTAL OFFICE

Mailing Address 220 N HATCHER AVE

City **PURCELLVILLE** State **VA** Zip Code **20132**

Purpose of Disbursement
PAC POSTAGE

001
Category/
Type

Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 30 / 2016

FEC Identification Number
C
Transaction ID : SB21B.38655
Amount of Each Disbursement this Period
11.35

Memo Item

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

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	17.80
TOTAL This Period (last page this line number only).....▶	23901.47

**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"/> 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)
MADISON PROJECT INC.

A. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3551 BLAIRSTONE ROAD STE 128-261

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement DEBT RETIREMENT CONTRIBUTION

Candidate Name THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C00581397
Transaction ID : SB23.386463
Amount of Each Disbursement this Period: 1500.00

Memo Item

B. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3551 BLAIRSTONE ROAD STE 128-261

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement VOID OF PREVIOUS - CHECK NOT RECEIVED

Candidate Name THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C00581397
Transaction ID : SB23.386462
Amount of Each Disbursement this Period: -500.00

Memo Item

C. MARY THOMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3551 BLAIRSTONE ROAD STE 128-261

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement VOID OF PREVIOUS - CHECK NOT RECEIVED

Candidate Name THOMAS, MARY, , ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 02

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C00581397
Transaction ID : SB23.386461
Amount of Each Disbursement this Period: -1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	-500.00
TOTAL This Period (last page this line number only).....▶	-500.00

**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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial) A. MACOMBER, WAYNE, , ,		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address PO BOX 1458		FEC Identification Number C []	
City PORT ORCHARD	State WA	Zip Code 98366	Transaction ID : SB28A.38648
Purpose of Disbursement REFUND		Category/ Type 001	Amount of Each Disbursement this Period 250.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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"/> 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)
MADISON PROJECT INC.

A. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement
PAC BANK FEES (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.386443
Amount of Each Disbursement this Period: 30.00

Memo Item

B. BANK OF AMERICA

Full Name (Last, First, Middle Initial)

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement
PAC BANK FEES (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.386460
Amount of Each Disbursement this Period: 10.00

Memo Item

C. BEH DIRECT

Full Name (Last, First, Middle Initial)

Mailing Address 600 CLARIDEN RANCH ROAD

City SOUTHLAKE State TX Zip Code 76092

Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.386446
Amount of Each Disbursement this Period: 4051.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4091.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)
A. SHAFER, KRISTOFFER, L., ,

Mailing Address 2420 VIA BOLOGNA
APT. 2428

City FORT WORTH State TX Zip Code 76109

Purpose of Disbursement
PAC STRATEGY CONSULTING (NON-CONTRIBUTION ACCOUNT)

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

FEC Identification Number

Transaction ID : SB29.386459
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
B. THOMAS GRAPHICS INC.

Mailing Address PO BOX 14226

City AUSTIN State TX Zip Code 78714

Purpose of Disbursement
PAC POSTAGE (NON-CONTRIBUTION ACCOUNT)

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 01 / 2016

FEC Identification Number

Transaction ID : SB29.386438
Amount of Each Disbursement this Period

Memo Item

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

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 29
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED METRICS LLC			Nature of Debt (Purpose): IE-WILLIS-MOBILE DEVICE DELIVERY
Mailing Address PO BOX 6014			
City FRISCO	State TX	Zip Code 75035	

Outstanding Balance Beginning This Period 4812.05		Transaction ID : SD10.8	
Amount Incurred This Period 0.00	Payment This Period 4812.05	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.
FEC IDENTIFICATION NUMBER
C C00298000

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

Full Name of Payee RED METRICS LLC
Mailing Address PO BOX 6014
City FRISCO State TX Zip Code 75035
Purpose of Expenditure MOBILE DEVICE DELIVERY
Category/Type 001
Date of Public Distribution/Dissemination 11/03/2016
Amount 4812.05
Transaction ID: SE.386448
Date of Disbursement or Obligation 12/05/2016

Name of Federal Candidate: WILLIS, COLM, ,
Support Oppose
Office Sought: House District: 05
President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 75220.75
Disbursement For: Primary General 2016
Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 4812.05
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures 4812.05

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

KILGORE, PAUL, A, MR.,

[Electronically Filed]

Date

01 / 31 / 2017

Signature