



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**New Day for America**

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="1956044.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1956044.61"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3273447.34"/>	<input type="text" value="3273447.34"/>
(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="5229491.95"/>	<input type="text" value="5229491.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2877978.28"/>	<input type="text" value="2877978.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2351513.67"/>	<input type="text" value="2351513.67"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="95479.02"/>	

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  
**New Day for America**

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).....	3270100.00	3270100.00
(ii) Unitemized .....	2640.00	2640.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3272740.00	3272740.00
(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) .....	3272740.00	3272740.00
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).....	707.34	707.34
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3273447.34	3273447.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3273447.34	3273447.34

**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 .....	729260.02	729260.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	729260.02	729260.02
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) .....	2148718.26	2148718.26
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)) ..	2877978.28	2877978.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2877978.28	2877978.28

**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) .....	3272740.00	3272740.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3272740.00	3272740.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	729260.02	729260.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	707.34	707.34
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	728552.68	728552.68

**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 6 OF 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. ACT Ohio Foundation PCE</b>		Date of Receipt
Mailing Address 222 E. Town Street		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
City	State	Zip Code
Columbus	OH	43215
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.5715</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="25000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="25000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. James Armile</b>		Date of Receipt
Mailing Address 8262 South Avenue		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
City	State	Zip Code
Boardman	OH	44512
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.5740</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
James Armile Inc	Dermatologist	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. John Bennett</b>		Date of Receipt
Mailing Address 83 Woodmere Drive		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2016"/>
City	State	Zip Code
Sudbury	MA	01776
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.5738</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Goodwin Procter	Attorney	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 107
	<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)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. Bet-Tech Construction**

Mailing Address 100 Bet-Tech Drive

City Aliquippa State PA Zip Code 15001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2016  
**Transaction ID : SA11AI.5678**

Amount of Each Receipt this Period  
 250000.00

Full Name (Last, First, Middle Initial)  
**B. Richard Blumenstein**

Mailing Address 32400 Telegraph Road Suite 205

City Bingham Farms State MI Zip Code 48025

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

Name of Employer Occupation  
Dover Development Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2016  
**Transaction ID : SA11AI.5735**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**C. Richard Blumenstein**

Mailing Address 32400 Telegraph Road Suite 205

City Bingham Farms State MI Zip Code 48025

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

Name of Employer Occupation  
Dover Development Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2016  
**Transaction ID : SA11AI.5737**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 107
	<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)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. Boich Co LLC**

Mailing Address 41 S High Street  
Suite 3750

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 07 / 2016  
**Transaction ID : SA11AI.5674**

Amount of Each Receipt this Period  
1000000.00

Full Name (Last, First, Middle Initial)  
**B. John Bottomley**

Mailing Address 4 Cotton Farm Lane

City North Hampton State NH Zip Code 03862

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

Name of Employer Occupation  
The Fuller Foundation Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2016  
**Transaction ID : SA11AI.5744**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Anthony Cafaro Sr.**

Mailing Address PO Box 2266

City Youngstown State OH Zip Code 44504

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 19 / 2016  
**Transaction ID : SA11AI.5691**

Amount of Each Receipt this Period  
75000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 107
	<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)  
**New Day for America**

**A. Christopher Cassin**  
Full Name (Last, First, Middle Initial)

Mailing Address 315 N. Lincoln

City Hinsdale State IL Zip Code 60521

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

Name of Employer American Fund Distributors Inc Occupation Financial Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 15 / 2016  
**Transaction ID : SA11AI.5700**

Amount of Each Receipt this Period  
 50000.00

**B. Certified Oil**  
Full Name (Last, First, Middle Initial)

Mailing Address 949 King Avenue

City Columbus State OH Zip Code 43212

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 29 / 2016  
**Transaction ID : SA11AI.5700**

Amount of Each Receipt this Period  
 50000.00

**C. Richard W Colburn**  
Full Name (Last, First, Middle Initial)

Mailing Address 555 Skokie Blvd Ste 555

City Northbrook State IL Zip Code 60062

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

Name of Employer Self Employed Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2016  
**Transaction ID : SA11AI.5706**

Amount of Each Receipt this Period  
 50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150000.00

**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 10 OF 107
	(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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Diamond Cellar 1</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2016 <b>Transaction ID : SA11AI.5722</b>
Mailing Address 6280 Sawmill Road		Amount of Each Receipt this Period 25000.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>B. Ed Eisert</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2016 <b>Transaction ID : SA11AI.5746</b>
Mailing Address 300 East 56th Street		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C	Name of Employer Orrick	Occupation Lawyer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. George Pearl Rd LTD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 15 / 2016 <b>Transaction ID : SA11AI.5676</b>
Mailing Address 18605 Detroit Avenue		Amount of Each Receipt this Period 500000.00
City Lakewood	State OH	Zip Code 44107
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 107
	<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)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. Daniel Gilbert**

Mailing Address 1074 Woodward Avenue

City State Zip Code  
Detroit MI 48262

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

Name of Employer Occupation  
Quicken Loans Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

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

**Transaction ID : SA11AI.5684**

Amount of Each Receipt this Period  
100000.00

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

Mailing Address 111 Pine Street

City State Zip Code  
San Francisco CA 94111

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

Name of Employer Occupation  
First Republic Bank CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 14 / 2016

**Transaction ID : SA11AI.5709**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**c. Independence Excavating Co Inc.**

Mailing Address 5720 Schaaf Road

City State Zip Code  
Independence OH 44131

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 19 / 2016

**Transaction ID : SA11AI.5680**

Amount of Each Receipt this Period  
125000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 107
	<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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Jonathan Mitchell Living Trust</b>		Date of Receipt MM / DD / YYYY 01 / 21 / 2016 <b>Transaction ID : SA11AI.5689</b>
Mailing Address 9220 W. Sunset Blvd Ste 309		Amount of Each Receipt this Period 100000.00
City West Hollywood	State CA	
Zip Code 90069		Aggregate Year-to-Date ▼ 100000.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ 100000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert Klein</b>		Date of Receipt MM / DD / YYYY 01 / 07 / 2016 <b>Transaction ID : SA11AI.5729</b>
Mailing Address 200 Public Square		Amount of Each Receipt this Period 20000.00
City Cleveland	State OH	
Zip Code 44114		Aggregate Year-to-Date ▼ 20000.00
FEC ID number of contributing federal political committee. C	Occupation President	
Name of Employer RIK Enterprises LLC	Occupation	Aggregate Year-to-Date ▼ 20000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. E. Floyd Kvamme</b>		Date of Receipt MM / DD / YYYY 01 / 07 / 2016 <b>Transaction ID : SA11AI.5692</b>
Mailing Address 19490 Glen Una Drive		Amount of Each Receipt this Period 50000.00
City Saratoga	State CA	
Zip Code 95070		Aggregate Year-to-Date ▼ 50000.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer N/A	Occupation	Aggregate Year-to-Date ▼ 50000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 107
	<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)  
**New Day for America**

**A. Jean Kvamme**  
Full Name (Last, First, Middle Initial)  
Mailing Address 19490 Glen Una Drive  
City Saratoga State CA Zip Code 95070  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Jean & E Floyd Kvamme Fndt Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 07 / 2016  
**Transaction ID : SA11AI.5694**  
Amount of Each Receipt this Period  
50000.00

**B. William Lennon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 38376 Apollo Pkwy  
City Willoughby State OH Zip Code 44094  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lokring Technologies Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 14600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 19 / 2016  
**Transaction ID : SA11AI.5733**  
Amount of Each Receipt this Period  
14600.00

**C. Robert Lowe**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11777 San Vicente Blvd Ste 900  
City Los Angeles State CA Zip Code 90049  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lowe Enterprises, Inc. Occupation Executive  
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  
01 / 15 / 2016  
**Transaction ID : SA11AI.5732**  
Amount of Each Receipt this Period  
20000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 84600.00  
**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 14 OF 107
	<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)  
**New Day for America**

**A. Milton Maltz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5500 Military Trail  
 City Jupiter State FL Zip Code 33458  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Malrite Company Occupation Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **50000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2016  
**Transaction ID : SA11AI.5702**  
 Amount of Each Receipt this Period  
**50000.00**

**B. Marc Mindy Trust**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 West 47th Street  
 City New York State NY Zip Code 10036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **25000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016  
**Transaction ID : SA11AI.5724**  
 Amount of Each Receipt this Period  
**25000.00**

**C. Paul R Marcus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 260 Franklin Street  
 City Boston State MA Zip Code 02110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Marcus Partners Occupation Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **22000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2016  
**Transaction ID : SA11AI.5726**  
 Amount of Each Receipt this Period  
**22000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>97000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 107
	<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)  
**New Day for America**

**A. M Betters Construction Inc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 Temple Road  
 City Monaca State PA Zip Code 15061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 125000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2016  
**Transaction ID : SA11AI.5682**  
 Amount of Each Receipt this Period  
 125000.00

**B. Ian McKinnon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 Indian Point Lane  
 City Riverside State CT Zip Code 06878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Sandia Holdings Investments  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2016  
**Transaction ID : SA11AI.5698**  
 Amount of Each Receipt this Period  
 50000.00

**C. Sonnet McKinnon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 Indian Point Lane  
 City Riverside State CT Zip Code 06878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Sandia Holdings Investments  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2016  
**Transaction ID : SA11AI.5696**  
 Amount of Each Receipt this Period  
 50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 107
	<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)  
**New Day for America**

**A. NKSFB LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3991 Macarthur Blvd  
 City Newport Beach State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2016  
**Transaction ID : SA11AI.5686**  
 Amount of Each Receipt this Period  
 100000.00

**B. Richard Pogue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 Lakeside Ave E  
 City Cleveland State OH Zip Code 44114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Jones Day Senior Advisor  
 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  
 01 / 11 / 2016  
**Transaction ID : SA11AI.5731**  
 Amount of Each Receipt this Period  
 20000.00

**C. Robert Roach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2044 Wyandotte Road  
 City Columbus State OH Zip Code 43212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northwestern Mutual Advisor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2016  
**Transaction ID : SA11AI.5742**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 107
	<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)  
**New Day for America**

**A. Ted Schlein**  
Full Name (Last, First, Middle Initial)

Mailing Address 776 Cotton Street

City Menlo Park State CA Zip Code 94025

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

Name of Employer Kleiner Perkins Caufield & Bye Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2016

**Transaction ID : SA11AI.5711**

Amount of Each Receipt this Period  
 30000.00

**B. Scott M Sipelle**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 Hodge Road

City Princeton State NJ Zip Code 08540

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

Name of Employer Westland Ventures Occupation Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2016

**Transaction ID : SA11AI.5713**

Amount of Each Receipt this Period  
 25000.00

**C. Nicholas Tiller**  
Full Name (Last, First, Middle Initial)

Mailing Address 185 Charter Oak Drive

City New Canaan State CT Zip Code 06840

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

Name of Employer Precocity Capital Occupation Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2016

**Transaction ID : SA11AI.5704**

Amount of Each Receipt this Period  
 50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105000.00

**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 18 OF 107
	<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)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. Wendt Family Trust**

Mailing Address 1 Muir Loop

City San Francisco State CA Zip Code 94129

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2016  
**Transaction ID : SA11AI.5688**

Amount of Each Receipt this Period  
100000.00

Full Name (Last, First, Middle Initial)  
**B. Jennifer Werner**

Mailing Address PO Box 8188

City Coburg State OR Zip Code 97408

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

Name of Employer Occupation  
Self Employed Civic Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2016  
**Transaction ID : SA11AI.5717**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**C. William Edward Bloomfield Trust**

Mailing Address 940 1st Street

City Manhattan Beach State CA Zip Code 90266

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2016  
**Transaction ID : SA11AI.5719**

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 107  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. William Edward Bloomfield Trust**  
 Mailing Address 940 1st Street  
 City State Zip Code  
 Manhattan Beach CA 90266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2016  
**Transaction ID : SA11AI.5721**  
 Amount of Each Receipt this Period  
 25000.00

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

Full Name (Last, First, Middle Initial)  
**C.**  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25000.00  
**TOTAL** This Period (last page this line number only)..... ▶ 3270100.00

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

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

FOR LINE NUMBER: PAGE 20 OF 107  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. ADP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 Northwest Point Blvd  
City Elk Grove State IL Zip Code 60007  
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  
01 / 26 / 2016  
**Transaction ID : SA15.5877**  
Amount of Each Receipt this Period  
707.34  
Fee Refund

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	707.34
<b>TOTAL</b> This Period (last page this line number only).....▶	707.34

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2016

**Transaction ID : SB21B.5763**

Amount of Each Disbursement this Period

22465.65
----------

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll-Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2016

**Transaction ID : SB21B.5765**

Amount of Each Disbursement this Period

48397.82
----------

**C. Maya Arrieta-Walden**

Full Name (Last, First, Middle Initial)

Mailing Address 190 S. High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2016

**Transaction ID : SB21B.5765.0**

Amount of Each Disbursement this Period

1322.51
---------

**[MEMO ITEM]**

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

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

70863.47
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Steven Bales**

Mailing Address 2336 Park Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.1**

Amount of Each Disbursement this Period

1826.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Jonathan Bocanegra**

Mailing Address 1992 Elbert Drive

City Powell State OH Zip Code 43065

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.2**

Amount of Each Disbursement this Period

1411.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Matthew Carle**

Mailing Address 7092 Pleasant Colony Circle

City Blacklick State OH Zip Code 43004

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.3**

Amount of Each Disbursement this Period

4734.96

[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

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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Matthew Carle**

Mailing Address 7092 Pleasant Colony Circle

City Blacklick State OH Zip Code 43004

Purpose of Disbursement  
Payroll

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
01		04		2016

**Transaction ID : SB21B.5765.4**

Amount of Each Disbursement this Period

850.21
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Jennelle Day**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Payroll

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
01		04		2016

**Transaction ID : SB21B.5765.5**

Amount of Each Disbursement this Period

1667.72
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Elle Decot**

Mailing Address 8 E Long Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Payroll

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
01		04		2016

**Transaction ID : SB21B.5765.6**

Amount of Each Disbursement this Period

1873.27
---------

[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Lucas Denney**

Mailing Address 1188 Perry Street

City Columbus State OH Zip Code 43201

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.7**

Amount of Each Disbursement this Period

1	4	3	7	.	6	3
---	---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jonathan Eberle**

Mailing Address 3165 S. Alma School Road

City Chandler State AZ Zip Code 85248

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.8**

Amount of Each Disbursement this Period

1	2	6	8	.	2	6
---	---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Coty Ferguson**

Mailing Address 656 Cahiers Valley Road

City Brevard State NC Zip Code 28712

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.9**

Amount of Each Disbursement this Period

1	7	2	5	.	8	2
---	---	---	---	---	---	---

**[MEMO ITEM]**

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

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

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

0	0	0	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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Harry Fones**

Mailing Address 25518 Joy Lane

City Damascus State MD Zip Code 20872

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.10**

Amount of Each Disbursement this Period

1115.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Levi Fox**

Mailing Address 2801 Bathgate Lane

City Matthew State NC Zip Code 28105

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.11**

Amount of Each Disbursement this Period

1268.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. John Friess**

Mailing Address 116 Blue Hill Lane

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.12**

Amount of Each Disbursement this Period

1141.83

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Mariah Halleck**

Mailing Address 2096 Countryside Drive

City Salem State OH Zip Code 44460

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.13

Amount of Each Disbursement this Period

1315.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Benjamin Kimmel**

Mailing Address 5582 Cypress Chase

City Columbus State OH Zip Code 43228

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.14

Amount of Each Disbursement this Period

1468.33

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Dave Luketic**

Mailing Address 119 E. Willow Street

City Columbus State OH Zip Code 43206

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.15

Amount of Each Disbursement this Period

2866.20

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Dwayne McClure**

Mailing Address 1800 Endeavor Lane

City Lake Wylie State SC Zip Code 29710

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.16**

Amount of Each Disbursement this Period

1	0	5	2	.	8	0
---	---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Kailyn McGowan**

Mailing Address 367 E Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.17**

Amount of Each Disbursement this Period

1	3	7	5	.	7	5
---	---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jeff Morgan**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Payroll

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	1		0	4		2	0	1	6

**Transaction ID : SB21B.5765.18**

Amount of Each Disbursement this Period

1	5	4	6	.	6	4
---	---	---	---	---	---	---

**[MEMO ITEM]**

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

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

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

0	0	0	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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jeff Morgan**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.19

Amount of Each Disbursement this Period

313.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Nate Nesbit**

Mailing Address 424 Willing Lakes Court

City Orangeburg State SC Zip Code 29118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.20

Amount of Each Disbursement this Period

1316.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Katalin Paroska**

Mailing Address 1500 West 3rd Ste 120

City Cleveland State OH Zip Code 44113

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Transaction ID : SB21B.5765.21

Amount of Each Disbursement this Period

3606.27

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Anne Peterson Hutto**

Mailing Address PO Box 12298

City Charleston State SC Zip Code 29422

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.22**

Amount of Each Disbursement this Period

1555.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Grant Shaffer**

Mailing Address 5692 Countrie Side Drive

City Columbus State OH Zip Code 43119

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.23**

Amount of Each Disbursement this Period

2851.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Daniel Spencer**

Mailing Address 1707 Evelyn Drive

City Rockville State MD Zip Code 20852

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5765.24**

Amount of Each Disbursement this Period

1090.15

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jordan Triance**

Mailing Address 284 Leslie Drive

City State Zip Code  
Wilmington OH 45177

Purpose of Disbursement  
Payroll

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
01	/	04	/	2016

**Transaction ID : SB21B.5765.25**

Amount of Each Disbursement this Period

1283.15
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Kevin Waters**

Mailing Address 107 Buena Vista Ave

City State Zip Code  
Columbus OH 43228

Purpose of Disbursement  
Payroll

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
01	/	04	/	2016

**Transaction ID : SB21B.5765.26**

Amount of Each Disbursement this Period

1290.33
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Connie Wehrkamp**

Mailing Address 1793 Northwest Blvd

City State Zip Code  
Columbus OH 43212

Purpose of Disbursement  
Payroll

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
01	/	04	/	2016

**Transaction ID : SB21B.5765.27**

Amount of Each Disbursement this Period

3008.13
---------

[MEMO ITEM]

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

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

0.00
------

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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Connie Wehrkamp**

Mailing Address 1793 Northwest Blvd

City Columbus State OH Zip Code 43212

Purpose of Disbursement  
Payroll

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
01		04		2016

**Transaction ID : SB21B.5765.28**

Amount of Each Disbursement this Period

813.94
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

**Transaction ID : SB21B.5758**

Amount of Each Disbursement this Period

154.00
--------

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Year End Payroll Reports

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

**Transaction ID : SB21B.5760**

Amount of Each Disbursement this Period

246.29
--------

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

400.29
--------

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

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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5761**

Amount of Each Disbursement this Period

21987.04

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll-Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5764**

Amount of Each Disbursement this Period

48040.66

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Maya Arrieta-Walden**

Mailing Address 190 S. High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5764.0**

Amount of Each Disbursement this Period

1322.49

Category/  
Type

**[MEMO ITEM]**

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

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

70027.70



**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Steven Bales**

Mailing Address 2336 Park Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.1**

Amount of Each Disbursement this Period

1826.26
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Jonathan Bocanegra**

Mailing Address 1992 Elbert Drive

City Powell State OH Zip Code 43065

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.2**

Amount of Each Disbursement this Period

1411.27
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Matthew Carle**

Mailing Address 7092 Pleasant Colony Circle

City Blacklick State OH Zip Code 43004

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.3**

Amount of Each Disbursement this Period

4734.97
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[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Matthew Carle**

Mailing Address 7092 Pleasant Colony Circle

City Blacklick State OH Zip Code 43004

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB21B.5764.4

Amount of Each Disbursement this Period

850.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Jennelle Day**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB21B.5764.5

Amount of Each Disbursement this Period

1667.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Elle Decot**

Mailing Address 8 E Long Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB21B.5764.6

Amount of Each Disbursement this Period

1873.27

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Lucas Denney**

Mailing Address 1188 Perry Street

City Columbus State OH Zip Code 43201

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

**Transaction ID : SB21B.5764.7**

Amount of Each Disbursement this Period

1	4	3	7	.	6	4
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jonathan Eberle**

Mailing Address 3165 S. Alma School Road

City Chandler State AZ Zip Code 85248

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

**Transaction ID : SB21B.5764.8**

Amount of Each Disbursement this Period

1	2	6	8	.	2	7
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Coty Ferguson**

Mailing Address 656 Cahiers Valley Road

City Brevard State NC Zip Code 28712

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

**Transaction ID : SB21B.5764.9**

Amount of Each Disbursement this Period

1	7	2	5	.	8	3
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**[MEMO ITEM]**

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

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

0	0	0	0	.	0	0
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0	0	0	0	.	0	0
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Harry Fones**

Mailing Address 25518 Joy Lane

City State Zip Code  
Damascus MD 20872

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.10**

Amount of Each Disbursement this Period

1115.49
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Levi Fox**

Mailing Address 2801 Bathgate Lane

City State Zip Code  
Matthew NC 28105

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.11**

Amount of Each Disbursement this Period

1268.27
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. John Friess**

Mailing Address 116 Blue Hill Lane

City State Zip Code  
Akron OH 44333

Purpose of Disbursement  
Payroll

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
01		19		2016

**Transaction ID : SB21B.5764.12**

Amount of Each Disbursement this Period

1141.84
---------

[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Mariah Halleck**

Mailing Address 2096 Countryside Drive

City Salem State OH Zip Code 44460

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : SB21B.5764.13

Amount of Each Disbursement this Period

1315.63
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Benjamin Kimmel**

Mailing Address 5582 Cypress Chase

City Columbus State OH Zip Code 43228

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : SB21B.5764.14

Amount of Each Disbursement this Period

1468.34
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Dave Luketic**

Mailing Address 119 E. Willow Street

City Columbus State OH Zip Code 43206

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : SB21B.5764.15

Amount of Each Disbursement this Period

2866.21
---------

[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Dwayne McClure</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 1800 Endeavor Lane		<b>Transaction ID : SB21B.5764.16</b>
City Lake Wylie	State SC	
Purpose of Disbursement Payroll	Candidate Name	Amount of Each Disbursement this Period 1052.80
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>B. Kailyn McGowan</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 367 E Broad Street		<b>Transaction ID : SB21B.5764.17</b>
City Columbus	State OH	
Purpose of Disbursement Payroll	Candidate Name	Amount of Each Disbursement this Period 1375.76
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>C. Jeff Morgan</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 58 Lindsay Road		<b>Transaction ID : SB21B.5764.18</b>
City Hookset	State NH	
Purpose of Disbursement Payroll	Candidate Name	Amount of Each Disbursement this Period 1546.64
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Nate Nesbit**

Mailing Address 424 Willing Lakes Court

City Orangeburg State SC Zip Code 29118

Purpose of Disbursement  
Payroll

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
01	/	19	/	2016

Transaction ID : SB21B.5764.19

Amount of Each Disbursement this Period

1316.62
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Katalin Paroska**

Mailing Address 1500 West 3rd  
Ste 120

City Cleveland State OH Zip Code 44113

Purpose of Disbursement  
Payroll

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
01	/	19	/	2016

Transaction ID : SB21B.5764.20

Amount of Each Disbursement this Period

3606.27
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Anne Peterson Hutto**

Mailing Address PO Box 12298

City Charleston State SC Zip Code 29422

Purpose of Disbursement  
Payroll

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
01	/	19	/	2016

Transaction ID : SB21B.5764.21

Amount of Each Disbursement this Period

1511.34
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[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Grant Shaffer**

Mailing Address 5692 Countrie Side Drive

City Columbus State OH Zip Code 43119

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : **SB21B.5764.22**

Amount of Each Disbursement this Period

2851.83
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Daniel Spencer**

Mailing Address 1707 Evelyn Drive

City Rockville State MD Zip Code 20852

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : **SB21B.5764.23**

Amount of Each Disbursement this Period

1090.17
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Jordan Triance**

Mailing Address 284 Leslie Drive

City Wilmington State OH Zip Code 45177

Purpose of Disbursement  
Payroll

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
01		19		2016

Transaction ID : **SB21B.5764.24**

Amount of Each Disbursement this Period

1283.15
---------

[MEMO ITEM]

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

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

0.00
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Kevin Waters**

Mailing Address 107 Buena Vista Ave

City Columbus State OH Zip Code 43228

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

Transaction ID : SB21B.5764.25

Amount of Each Disbursement this Period

1	2	9	0	.	3	2
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Connie Wehrkamp**

Mailing Address 1793 Northwest Blvd

City Columbus State OH Zip Code 43212

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

Transaction ID : SB21B.5764.26

Amount of Each Disbursement this Period

3	0	0	8	.	1	3
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Connie Wehrkamp**

Mailing Address 1793 Northwest Blvd

City Columbus State OH Zip Code 43212

Purpose of Disbursement  
Payroll

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	1		1	9		2	0	1	6

Transaction ID : SB21B.5764.27

Amount of Each Disbursement this Period

8	1	3	.	9	4
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
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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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 Northwest Point Blvd

City Elk Grove State IL Zip Code 60007

Purpose of Disbursement  
Payroll Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2016

**Transaction ID : SB21B.5759**

Amount of Each Disbursement this Period

200.93

Full Name (Last, First, Middle Initial)

**B. Alvarado Consulting LLC**

Mailing Address 16700 Poppy Mallow Drive

City Austin State TX Zip Code 78738

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5766**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. American Viewpoint Inc.**

Mailing Address 1199 North Fairfax Street  
Ste 808

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2016

**Transaction ID : SB21B.5754**

Amount of Each Disbursement this Period

27280.17

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

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

37481.10

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Andrew Insurance Associates Inc.**

Mailing Address 9912 Brewster Lane

City Powell State OH Zip Code 43065

Purpose of Disbursement  
Property Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

Transaction ID : SB21B.5771

Amount of Each Disbursement this Period

3	6	2	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Andrew Insurance Associates Inc.**

Mailing Address 9912 Brewster Lane

City Powell State OH Zip Code 43065

Purpose of Disbursement  
Property Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	6

Transaction ID : SB21B.5769

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. Arena Online**

Mailing Address 1780 West Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	1	6

Transaction ID : SB21B.5774

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

1	8	8	6	.	0	0
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Arena Online**

Mailing Address 1780 West Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2016

**Transaction ID : SB21B.5775**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Arena Online**

Mailing Address 1780 West Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2016

**Transaction ID : SB21B.5776**

Amount of Each Disbursement this Period

4260.00

Full Name (Last, First, Middle Initial)

**C. Arena Online**

Mailing Address 1780 West Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2016

**Transaction ID : SB21B.5773**

Amount of Each Disbursement this Period

934.00

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

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

8194.00

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 5080

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5777**

Amount of Each Disbursement this Period

445.39

Full Name (Last, First, Middle Initial)

**B. ATT UVerse**

Mailing Address PO Box 5014

City Carol Stream State IL Zip Code 60194

Purpose of Disbursement Internet/Cable

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5778**

Amount of Each Disbursement this Period

763.26

Full Name (Last, First, Middle Initial)

**C. Baker Hostetler LLP**

Mailing Address PO Box 70189

City Cleveland State OH Zip Code 44190

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5780**

Amount of Each Disbursement this Period

8000.00

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

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

9208.65

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Baker Hostetler LLP**

Mailing Address PO Box 70189

City Cleveland State OH Zip Code 44190

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5781**

Amount of Each Disbursement this Period

24002.93

Full Name (Last, First, Middle Initial)

**B. Steven Bales**

Mailing Address 2336 Park Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5865**

Amount of Each Disbursement this Period

1065.98

Full Name (Last, First, Middle Initial)

**C. Flooring by Cogdill**

Mailing Address 1700 Huger Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Carpet Remnant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5865.0**

Amount of Each Disbursement this Period

219.15

**[MEMO ITEM]**

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

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

25068.91

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Brooke Bodney**

Mailing Address 685 City Park Avenue

City Columbus State OH Zip Code 43206

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5783**

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**B. Carolina Success**

Mailing Address 742 Wade Hampton Blvd

City Greenville State SC Zip Code 29609

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5786**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Carolina Success**

Mailing Address 742 Wade Hampton Blvd

City Greenville State SC Zip Code 29609

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

**Transaction ID : SB21B.5787**

Amount of Each Disbursement this Period

1500.00

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

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

28000.00

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. CIM Communications LLC**

Mailing Address 2637 River Drive  
#14

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5789**

Amount of Each Disbursement this Period

7000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 Spring Hill Rd.  
Ste 400

City Tysons Corners State VA Zip Code 22182

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5792**

Amount of Each Disbursement this Period

555.65

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 Spring Hill Rd.  
Ste 400

City Tysons Corners State VA Zip Code 22182

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5793**

Amount of Each Disbursement this Period

1297.62

Category/  
Type

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

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

8853.27



**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 Spring Hill Rd.  
Ste 400

City Tysons Corners State VA Zip Code 22182

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5790**

Amount of Each Disbursement this Period

72.44

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 Spring Hill Rd.  
Ste 400

City Tysons Corners State VA Zip Code 22182

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

**Transaction ID : SB21B.5791**

Amount of Each Disbursement this Period

147.19

Full Name (Last, First, Middle Initial)

**C. Curry Place Incorporated**

Mailing Address PO Box 675

City Holderness State NH Zip Code 03245

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5794**

Amount of Each Disbursement this Period

1575.00

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

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

1794.63

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jennelle Day**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5820**

Amount of Each Disbursement this Period

66.48

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Elle Decot**

Mailing Address 8 E Long Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5798**

Amount of Each Disbursement this Period

580.33

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 410 Terry Avenue N

City Seattle State WA Zip Code 98109

Purpose of Disbursement  
Printers

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5798.1**

Amount of Each Disbursement this Period

263.84

Category/  
Type

**[MEMO ITEM]**

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

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

646.81

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Mailing Address 3875 Airways Blvd

City Memphis State TN Zip Code 38116

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5798.2**

Amount of Each Disbursement this Period

83.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Lucas Denney**

Mailing Address 1188 Perry Street

City Columbus State OH Zip Code 43201

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5836**

Amount of Each Disbursement this Period

539.22

Full Name (Last, First, Middle Initial)

**C. Directv**

Mailing Address PO Box 60036

City Los Angeles State CA Zip Code 90060

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5797**

Amount of Each Disbursement this Period

10.56

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

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

549.78

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jonathan Eberle**

Mailing Address 3165 S. Alma School Road

City Chandler State AZ Zip Code 85248

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5822**

Amount of Each Disbursement this Period

344.93

Full Name (Last, First, Middle Initial)

**B. Epiphany Productions Inc.**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5799**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. Eyepifany Properties LLC**

Mailing Address 1031 Hwy 41  
Ste 400

City Mt Pleasant State SC Zip Code 29466

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5802**

Amount of Each Disbursement this Period

1450.00

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

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

14294.93

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Harry Fones**

Mailing Address 25518 Joy Lane

City Damascus State MD Zip Code 20872

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 11 / 2016

**Transaction ID : SB21B.5808**

Amount of Each Disbursement this Period

569.79

Full Name (Last, First, Middle Initial)

**B. Formula One Realty LLC**

Mailing Address 48 Brook Street

City Manchester State NH Zip Code 03104

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 05 / 2016

**Transaction ID : SB21B.5803**

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**C. Levi Fox**

Mailing Address 2801 Bathgate Lane

City Matthew State NC Zip Code 28105

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 11 / 2016

**Transaction ID : SB21B.5834**

Amount of Each Disbursement this Period

151.67

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

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

1521.46

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Grand Strand Water & Sewer Authority**

Mailing Address PO BOX 2308

City Conway State SC Zip Code 29528

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	6

Transaction ID : **SB21B.5804**

Amount of Each Disbursement this Period

2	5	.	2	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Guaranteed Brokerage Services Inc.**

Mailing Address 150 E Mound Street  
Ste 103

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	6

Transaction ID : **SB21B.5807**

Amount of Each Disbursement this Period

5	0	0	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mariah Halleck**

Mailing Address 2096 Countryside Drive

City Salem State OH Zip Code 44460

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

Transaction ID : **SB21B.5837**

Amount of Each Disbursement this Period

1	1	5	8	.	3	1
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6	1	8	3	.	5	5
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. New Hampshire Republican State Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2016

Mailing Address 10 Water Street

**Transaction ID : SB21B.5837.0**

City State Zip Code  
Concord NH 03301

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
Vendor Table Fee

Category/Type
---------------

Candidate Name

**[MEMO ITEM]**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. William Hines**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		05		2016

Mailing Address 128 Pearl Drive

**Transaction ID : SB21B.5872**

City State Zip Code  
Southampton PA 18966

Amount of Each Disbursement this Period

838.63
--------

Purpose of Disbursement  
Fundraising Consulting Fee

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Huntington National Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2016

Mailing Address PO Box 1558

**Transaction ID : SB21B.5812**

City State Zip Code  
Columbus OH 43216

Amount of Each Disbursement this Period

694.56
--------

Purpose of Disbursement  
Merchant Fees

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

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

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

1533.19
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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement  
Check Printing Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

**Transaction ID : SB21B.5811**

Amount of Each Disbursement this Period

89.21

Full Name (Last, First, Middle Initial)

**B. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

**Transaction ID : SB21B.5809**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

**Transaction ID : SB21B.5810**

Amount of Each Disbursement this Period

70.00

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

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

184.21



**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Benjamin Kimmel**

Mailing Address 5582 Cypress Chase

City Columbus State OH Zip Code 43228

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5782**

Amount of Each Disbursement this Period

724.19

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Sam's Club**

Mailing Address 1211 Woodruff Road

City Greenville State SC Zip Code 29607

Purpose of Disbursement  
Printer Ink, Paper, and misc supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5782.1**

Amount of Each Disbursement this Period

162.80

Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. King Strategic Communications, Inc.**

Mailing Address 750 Cross Pointe Blvd

City Gahanna State OH Zip Code 43230

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2016

**Transaction ID : SB21B.5831**

Amount of Each Disbursement this Period

51390.08

Category/  
Type

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

52114.27

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

### A. Lacey Beaulieu & Associates

Mailing Address PO Box 503930

City San Diego State CA Zip Code 92150

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : SB21B.5832

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

### B. Lake Wylie Chamber of Commerce

Mailing Address 264 Latitude Lane

City Clover State SC Zip Code 29710

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : SB21B.5833

Amount of Each Disbursement this Period

1300.00

Full Name (Last, First, Middle Initial)

### C. Dave Luketic

Mailing Address 119 E. Willow Street

City Columbus State OH Zip Code 43206

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5796

Amount of Each Disbursement this Period

1299.06

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

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

17599.06

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Southwest Air**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5796.1

Amount of Each Disbursement this Period

347.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Radisson Hotel Manchester**

Mailing Address 700 Elm Street

City Manchester State NH Zip Code 03101

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5796.2

Amount of Each Disbursement this Period

325.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Marriott Group LLC**

Mailing Address PO Box 980847

City Park City State UT Zip Code 84098

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : SB21B.5840

Amount of Each Disbursement this Period

7500.00

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

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

7500.00

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Kailyn McGowan**

Mailing Address 367 E Broad Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5824**

Amount of Each Disbursement this Period

388.35

Full Name (Last, First, Middle Initial)

**B. Mark McIntosh**

Mailing Address 9587 Bronte Drive

City Burke State VA Zip Code 22015

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2016

**Transaction ID : SB21B.5838**

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**C. Cameron Meyers Isen**

Mailing Address 11 S. Wyoming Ave  
#4

City Ardmore State PA Zip Code 19003

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5784**

Amount of Each Disbursement this Period

500.00

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

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

25888.35

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jeff Morgan**

Mailing Address 58 Lindsay Road

City Hookset State NH Zip Code 03106

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

**Transaction ID : SB21B.5818**

Amount of Each Disbursement this Period

2	5	3	.	1	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Moxie Realty LLC**

Mailing Address 39 Central Square

City Keene State NH Zip Code 03431

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	6

**Transaction ID : SB21B.5846**

Amount of Each Disbursement this Period

8	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. NCR Properties LLC**

Mailing Address 2216 Glens Ray Road

City Surfside Beach State SC Zip Code 29575

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	6

**Transaction ID : SB21B.5848**

Amount of Each Disbursement this Period

1	3	5	.	0	0
---	---	---	---	---	---

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

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

2	4	0	.	3	1	6
---	---	---	---	---	---	---

2	4	0	.	3	1	6
---	---	---	---	---	---	---

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Michael Neary Jr.**

Mailing Address 69 West Street  
Apt 2

City West Warwick State RI Zip Code 02893

Purpose of Disbursement  
Fund Raising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5844**

Amount of Each Disbursement this Period

1419.22

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Nate Nesbit**

Mailing Address 424 Willing Lakes Court

City Orangeburg State SC Zip Code 29118

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5847**

Amount of Each Disbursement this Period

748.96

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Outland Creative Works Inc.**

Mailing Address 1531 Livonia Ave

City Los Angeles State CA Zip Code 90035

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5851**

Amount of Each Disbursement this Period

15000.00

Category/  
Type

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

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

17168.18

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Outland Creative Works Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2016

Mailing Address 1531 Livonia Ave

**Transaction ID : SB21B.5850**

City Los Angeles State CA Zip Code 90035

Amount of Each Disbursement this Period

319.49
--------

Purpose of Disbursement  
Media Consulting

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Park N Ride**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		05		2016

Mailing Address 310 N. 5th Street

**Transaction ID : SB21B.5852**

City Columbus State OH Zip Code 43215

Amount of Each Disbursement this Period

420.00
--------

Purpose of Disbursement  
Parking

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Katalin Paroska**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2016

Mailing Address 1500 West 3rd  
Ste 120

**Transaction ID : SB21B.5825**

City Cleveland State OH Zip Code 44113

Amount of Each Disbursement this Period

573.90
--------

Purpose of Disbursement  
Reimburse Expenses

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

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

1313.39
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**TOTAL** This Period (last page this line number only)..... ▶

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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"/> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 50 Public Square

City Cleveland State OH Zip Code 44113

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : **SB21B.5825.0**

Amount of Each Disbursement this Period

464.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Peabody Smith Realty**

Mailing Address PO Box 550

City Holderness State NH Zip Code 03245

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : **SB21B.5853**

Amount of Each Disbursement this Period

1050.00

Full Name (Last, First, Middle Initial)

**C. Anne Peterson Hutto**

Mailing Address PO Box 12298

City Charleston State SC Zip Code 29422

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : **SB21B.5772**

Amount of Each Disbursement this Period

794.37

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

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

1844.37



**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Amy Petraglia**

Mailing Address 8623 Lexington Place

City Wexford State PA Zip Code 15090

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5768**

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**B. Nicholas Petromelis**

Mailing Address 33 Benevento Circle

City Peabody State MA Zip Code 01960

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5849**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. PKL Consulting Inc.**

Mailing Address PO Box 8535

City Northfield State IL Zip Code 60093

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5854**

Amount of Each Disbursement this Period

7500.00

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

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

11750.00

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Project Applecart LLC**

Mailing Address 1441 Broadway  
3rd Floor

City New York State NY Zip Code 10018

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5855**

Amount of Each Disbursement this Period

184275.00

Full Name (Last, First, Middle Initial)

**B. Prospect Strategic Comm LLC**

Mailing Address 2001 Clarendon Blvd  
#121

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5856**

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

**C. Lillian Mae Radack**

Mailing Address 12 Fern Way

City Madbury State NH Zip Code 03823

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5835**

Amount of Each Disbursement this Period

500.00

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

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

193775.00

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Residential Rentals**

Mailing Address 7 South State Street

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5857**

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**B. RING, LLC**

Mailing Address PO BOX 207

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2016

**Transaction ID : SB21B.5858**

Amount of Each Disbursement this Period

2855.51

Full Name (Last, First, Middle Initial)

**C. RING, LLC**

Mailing Address PO BOX 207

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2016

**Transaction ID : SB21B.5859**

Amount of Each Disbursement this Period

6150.00

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

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

9805.51

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. River Walk Hudson LLC**

Mailing Address 54 Heritage Hill Road

City Windham State NH Zip Code 03087

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5861**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. River Walk Hudson LLC**

Mailing Address 54 Heritage Hill Road

City Windham State NH Zip Code 03087

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5860**

Amount of Each Disbursement this Period

304.38

Full Name (Last, First, Middle Initial)

**C. Santee Cooper**

Mailing Address PO Box 188

City Moncks Corner State SC Zip Code 29461

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5862**

Amount of Each Disbursement this Period

12.74

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

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

1317.12

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Grant Shaffer**

Mailing Address 5692 Countrie Side Drive

City Columbus State OH Zip Code 43119

Purpose of Disbursement  
Reimburse Mileage and Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5806**

Amount of Each Disbursement this Period

456.71

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Evangelos Simos**

Mailing Address 65 Newmarket Road

City Durham State NH Zip Code 03824

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5800**

Amount of Each Disbursement this Period

1100.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Carey D. Sirianni**

Mailing Address PO Box 186

City Sewickley State PA Zip Code 15143

Purpose of Disbursement  
Fundraising Consulting Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5785**

Amount of Each Disbursement this Period

3750.00

Category/  
Type

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

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

5306.71

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Chris Slick</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2016
Mailing Address 1324 Pulaki Street #		<b>Transaction ID : SB21B.5788</b>
City Columbiz	State SC	
Purpose of Disbursement Reimburse Mileage and Expenses		Amount of Each Disbursement this Period 3513.77
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Costco</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2016
Mailing Address 3050 Ashley Town Center Drive		<b>Transaction ID : SB21B.5788.0</b>
City Charleston	State SC	
Purpose of Disbursement Office Furniture		Amount of Each Disbursement this Period 758.16
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) ▼	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hotwire</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2016
Mailing Address 333 Market Street		<b>Transaction ID : SB21B.5788.1</b>
City San Francisco	State CA	
Purpose of Disbursement Conference/Hotel Romms		Amount of Each Disbursement this Period 395.11
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) ▼	Category/Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3513.77
<b>TOTAL</b> 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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Cracker Barrel**

Mailing Address 2183 N Highway 17

City Mt Pleasant State SC Zip Code 29466

Purpose of Disbursement  
Food and Beverages for Staff

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5788.2

Amount of Each Disbursement this Period

271.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Pass the Popcorn**

Mailing Address 3232 East Shea Blvd

City Phoenix State AZ Zip Code 85028

Purpose of Disbursement  
Entry Tickets for Debate Viewing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5788.3

Amount of Each Disbursement this Period

473.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Grand Strand Water & Sewer Authority**

Mailing Address PO BOX 2308

City Conway State SC Zip Code 29528

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5788.4

Amount of Each Disbursement this Period

251.00

[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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Solution Pronto**

Mailing Address 59 Hanford Street

City Columbus State OH Zip Code 43206

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

**Transaction ID : SB21B.5864**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Daniel Spencer**

Mailing Address 1707 Evelyn Drive

City Rockville State MD Zip Code 20852

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

**Transaction ID : SB21B.5795**

Amount of Each Disbursement this Period

320.04

Full Name (Last, First, Middle Initial)

**C. Strategic Perception, Inc.**

Mailing Address 6158 Mulholland Highway

City Hollywood State CA Zip Code 90068

Purpose of Disbursement  
Media Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5973**

Amount of Each Disbursement this Period

5342.27

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

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

6162.31



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Strategic Perception, Inc.**

Mailing Address 6158 Mulholland Highway

City Hollywood State CA Zip Code 90068

Purpose of Disbursement  
Media Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

**Transaction ID : SB21B.5974**

Amount of Each Disbursement this Period

40525.02

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Strategic Perception, Inc.**

Mailing Address 6158 Mulholland Highway

City Hollywood State CA Zip Code 90068

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : SB21B.5866**

Amount of Each Disbursement this Period

20000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address PO Box 70872

City Charlotte State ND Zip Code 28272

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

**Transaction ID : SB21B.5870**

Amount of Each Disbursement this Period

229.94

Category/  
Type

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

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

60754.96

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address PO Box 70872

City Charlotte State ND Zip Code 28272

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB21B.5871

Amount of Each Disbursement this Period

319.98

Full Name (Last, First, Middle Initial)

**B. Jordan Triance**

Mailing Address 284 Leslie Drive

City Wilmington State OH Zip Code 45177

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2016

Transaction ID : SB21B.5823

Amount of Each Disbursement this Period

128.67

Full Name (Last, First, Middle Initial)

**C. Jay Wadsworth**

Mailing Address 2 Clocktower Place  
#323

City Nashua State NH Zip Code 03060

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : SB21B.5816

Amount of Each Disbursement this Period

1161.18

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

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

1609.83

**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)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Jack Wagner**

Mailing Address 937 E Pico Blvd  
#302

City Los Angeles State CA Zip Code 90021

Purpose of Disbursement  
Media Production

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

**Transaction ID : SB21B.5813**

Amount of Each Disbursement this Period

13500.00

Full Name (Last, First, Middle Initial)

**B. Kevin Waters**

Mailing Address 107 Buena Vista Ave

City Columbus State OH Zip Code 43228

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 11 / 2016

**Transaction ID : SB21B.5829**

Amount of Each Disbursement this Period

430.34

Full Name (Last, First, Middle Initial)

**C. Winterset CPA Group**

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement  
Accounting Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 19 / 2016

**Transaction ID : SB21B.5874**

Amount of Each Disbursement this Period

3110.00

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

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

17040.34

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)

### A. Matthew Wood

Mailing Address 314 23rd Street

City Sacramento State CA Zip Code 95816

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	6

Transaction ID : SB21B.5842

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. Katherine Young

Mailing Address 13 Goodway Drive

City Epping State NH Zip Code 03042

Purpose of Disbursement  
Fundraising Consulting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	6

Transaction ID : SB21B.5828

Amount of Each Disbursement this Period

1	4	1	9	.	2	2			
---	---	---	---	---	---	---	--	--	--

Full Name (Last, First, Middle Initial)

### C. Katherine Young

Mailing Address 13 Goodway Drive

City Epping State NH Zip Code 03042

Purpose of Disbursement  
Reimburse Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

Transaction ID : SB21B.5826

Amount of Each Disbursement this Period

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

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

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

6	4	7	.	8	2				
---	---	---	---	---	---	--	--	--	--

7	3	0	3	5	.	1	0		
---	---	---	---	---	---	---	---	--	--

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**New Day for America**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Viewpoint Inc.</b>	Nature of Debt (Purpose): Polling
Mailing Address 1199 North Fairfax Street Ste 808	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="27280.17"/>	<b>Transaction ID : SD10.5599</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="27280.17"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Arena Online</b>	Nature of Debt (Purpose): Website Edits
Mailing Address 1780 West Sequoia Vista Circle	
City State Zip Code Salt Lake City UT 84104	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5994</b>	
Amount Incurred This Period <input type="text" value="23358.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="23358.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Arena Online</b>	Nature of Debt (Purpose): Advertising
Mailing Address 1780 West Sequoia Vista Circle	
City State Zip Code Salt Lake City UT 84104	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5992</b>	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="24358.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**New Day for America**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Promotions</b>	Nature of Debt (Purpose): Promotional Materials
Mailing Address 1919 M Street NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5993</b>	
Amount Incurred This Period 8844.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 8844.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RING, LLC</b>	Nature of Debt (Purpose): Polling
Mailing Address PO BOX 207	
City State Zip Code DUBLIN OH 43017	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5990</b>	
Amount Incurred This Period 8000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RING, LLC</b>	Nature of Debt (Purpose): Polling
Mailing Address PO BOX 207	
City State Zip Code DUBLIN OH 43017	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5991</b>	
Amount Incurred This Period 1538.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 1538.40

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	18382.93
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**New Day for America**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Perception, Inc.</b>	Nature of Debt (Purpose): Media Consulting
Mailing Address 6158 Mulholland Highway	
City State Zip Code Hollywood CA 90068	

Outstanding Balance Beginning This Period 5342.27	<b>Transaction ID : SD10.5598</b>	
Amount Incurred This Period 0.00	Payment This Period 5342.27	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Perception, Inc.</b>	Nature of Debt (Purpose): Media Consulting
Mailing Address 6158 Mulholland Highway	
City State Zip Code Hollywood CA 90068	

Outstanding Balance Beginning This Period 40525.02	<b>Transaction ID : SD10.5596</b>	
Amount Incurred This Period 0.00	Payment This Period 40525.02	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Perception, Inc.</b>	Nature of Debt (Purpose): Media Production
Mailing Address 6158 Mulholland Highway	
City State Zip Code Hollywood CA 90068	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5989</b>	
Amount Incurred This Period 39820.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 39820.09

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	39820.09
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 80 OF 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**New Day for America**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Perception, Inc.</b>	Nature of Debt (Purpose): Media Production
Mailing Address 6158 Mulholland Highway	
City State Zip Code Hollywood CA 90068	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5980</b>	
Amount Incurred This Period <input type="text" value="12918.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12918.00"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="12918.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="95479.02"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="95479.02"/>



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Arena Online
Mailing Address
1780 West Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Digital Advertising Category/
Type
Name of Federal Candidate
JOHN R KASICH Support
Office Sought:
President State:
NH
Calendar Year-To-Date
Per Election for Office Sought
395600.00

Date of Public Distribution/Dissemination
01 / 16 / 2016
Amount
3000.00
Transaction ID : SE.4291
Date of Disbursement or Obligation
01 / 17 / 2016
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Arena Online
Mailing Address
1780 West Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Digital Media Category/
Type
Name of Federal Candidate
JOHN R KASICH Support
Office Sought:
President State:
OH
Calendar Year-To-Date
Per Election for Office Sought
50000.00

Date of Public Distribution/Dissemination
01 / 21 / 2016
Amount
50000.00
Transaction ID : SE.4325
Date of Disbursement or Obligation
01 / 22 / 2016
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 53000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.

J. Matthew Yuskewich
[Electronically Filed]
Date
02 / 20 / 2016
Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Arena Online</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>01 / 29 / 2016</b>
Mailing Address 1780 West Sequoia Vista Circle	Amount <b>1000.00</b>
City State Zip Code Salt Lake City UT 84104	<b>Transaction ID : SE.5237</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>01 / 30 / 2016</b>
Purpose of Expenditure DIGITAL ADVERTISING	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <b>1261648.31</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Bookbag Video</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>01 / 15 / 2016</b>
Mailing Address 45 E Lincoln Street	Amount <b>1500.00</b>
City State Zip Code Columbus OH 43215	<b>Transaction ID : SE.4292</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Video Production	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <b>1500.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>2500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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.

*J. Matthew Yuskewich*      **[Electronically Filed]**      Date **02 / 20 / 2016**

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Bookbag Video</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 11 / 2016
Mailing Address 45 E Lincoln Street	Amount <span style="border: 1px solid black; padding: 2px;">1100.00</span>
City Columbus State OH Zip Code 43215	<b>Transaction ID : SE.4279</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 11 / 2016
Purpose of Expenditure Video Production Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate CHRISTOPHER J CHRISTIE <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">202600.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016

Full Name of Payee <b>i360, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 11 / 2016
Mailing Address PO Box 37046	Amount <span style="border: 1px solid black; padding: 2px;">28008.04</span>
City Baltimore State MD Zip Code 21297	<b>Transaction ID : SE.4288</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Purpose of Expenditure Phone Bank-Actual Cost Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate JOHN R KASICH <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">423608.04</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">29108.04</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
---	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>King Strategic Communications, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 19 / 2016</b>	
Mailing Address <b>750 Cross Pointe Blvd</b>		Amount <span style="border: 1px solid black; padding: 2px;">2750.06</span>	
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	<b>Transaction ID : SE.4303</b>
Purpose of Expenditure <b>Crowd Building</b>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 20 / 2016</b>	
Name of Federal Candidate <b>JOHN R KASICH</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">649558.10</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>King Strategic Communications, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 19 / 2016</b>	
Mailing Address <b>750 Cross Pointe Blvd</b>		Amount <span style="border: 1px solid black; padding: 2px;">2585.40</span>	
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	<b>Transaction ID : SE.4304</b>
Purpose of Expenditure <b>Crowd Building</b>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 20 / 2016</b>	
Name of Federal Candidate <b>JOHN R KASICH</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">652143.50</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">5335.46</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
**02 / 20 / 2016**

Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 19 / 2016</b>
Mailing Address 750 Cross Pointe Blvd	Amount <b>2465.00</b>
City State Zip Code <b>Gahanna OH 43230</b>	<b>Transaction ID : SE.4305</b> Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 20 / 2016</b>
Purpose of Expenditure Crowd Building	Category/Type
Name of Federal Candidate <b>JOHN R KASICH</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>654608.50</b>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 19 / 2016</b>
Mailing Address 750 Cross Pointe Blvd	Amount <b>2535.56</b>
City State Zip Code <b>Gahanna OH 43230</b>	<b>Transaction ID : SE.4306</b> Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 20 / 2016</b>
Purpose of Expenditure Crowd Building	Category/Type
Name of Federal Candidate <b>JOHN R KASICH</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>657144.06</b>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>5000.56</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

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.

*J. Matthew Yuskewich*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **02 / 20 / 2016**

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">2140.22</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4307</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 20 / 2016
Purpose of Expenditure Crowd Building	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">659284.28</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">2466.40</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4308</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 20 / 2016
Purpose of Expenditure Crowd Building	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">661750.68</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">4606.62</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 02 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Date of Public Distribution/Dissemination
01 / 19 / 2016
Amount
2705.80
Transaction ID : SE.4309
Date of Disbursement or Obligation
01 / 20 / 2016
Purpose of Expenditure
Crowd Building Category/Type
Name of Federal Candidate
JOHN R KASICH Support
Office Sought: President State: NH
Calendar Year-To-Date
Per Election for Office Sought
664456.48
Disbursement For: Primary 2016

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Date of Public Distribution/Dissemination
01 / 22 / 2016
Amount
34964.89
Transaction ID : SE.4310
Date of Disbursement or Obligation
01 / 20 / 2016
Purpose of Expenditure
Crowd Building Category/Type
Name of Federal Candidate
JOHN R KASICH Support
Office Sought: President State: NH
Calendar Year-To-Date
Per Election for Office Sought
699421.37
Disbursement For: Primary 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... 37670.69
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.
J. Matthew Yuskewich [Electronically Filed] Date 02 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
Crowd Building
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: NH
Calendar Year-To-Date
Per Election for Office Sought
702100.57

Date of Public Distribution/Dissemination
01 / 19 / 2016
Amount
2679.20
Transaction ID : SE.4311
Date of Disbursement or Obligation
01 / 20 / 2016
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: NH
Calendar Year-To-Date
Per Election for Office Sought
982468.15

Date of Public Distribution/Dissemination
01 / 25 / 2016
Amount
2374.00
Transaction ID : SE.4333
Date of Disbursement or Obligation
01 / 22 / 2016
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 5053.20
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.
J. Matthew Yuskewich
[Electronically Filed]
Date
02 / 20 / 2016
Signature



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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">2756.20</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4334</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">985224.35</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">2506.30</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4335</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">987730.65</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">5262.50</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
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Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>King Strategic Communications, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 25 / 2016</b>	
Mailing Address <b>750 Cross Pointe Blvd</b>		Amount <span style="border: 1px solid black; padding: 2px;">2692.50</span>	
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	<b>Transaction ID : SE.4336</b>
Purpose of Expenditure <b>MAIL</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 22 / 2016</b>	
Name of Federal Candidate <b>JOHN R KASICH</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">990423.15</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>King Strategic Communications, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 25 / 2016</b>	
Mailing Address <b>750 Cross Pointe Blvd</b>		Amount <span style="border: 1px solid black; padding: 2px;">2488.80</span>	
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	<b>Transaction ID : SE.4337</b>
Purpose of Expenditure <b>MAIL</b>	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>01 / 22 / 2016</b>	
Name of Federal Candidate <b>JOHN R KASICH</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">992911.95</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">5181.30</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
**02 / 20 / 2016**

Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">2651.20</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4338</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">995563.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">4458.05</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4339</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 22 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate CHRISTOPHER J CHRISTIE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1000021.20</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">7109.25</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
RAFAEL EDWARD 'TED' CRUZ
Calendar Year-To-Date
Per Election for Office Sought
1005182.73

Date of Public Distribution/Dissemination
01 / 25 / 2016
Amount
5161.53
Transaction ID : SE.4340
Date of Disbursement or Obligation
01 / 22 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
DONALD J TRUMP
Calendar Year-To-Date
Per Election for Office Sought
1017029.67

Date of Public Distribution/Dissemination
01 / 25 / 2016
Amount
11846.94
Transaction ID : SE.4342
Date of Disbursement or Obligation
01 / 22 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 17008.47
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.
J. Matthew Yuskewich
[Electronically Filed]
Date 02 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
JEB BUSH Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1023685.19

Date of Public Distribution/Dissemination
01 / 25 / 2016
Amount
6655.52
Transaction ID : SE.4343
Date of Disbursement or Obligation
01 / 22 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
MARCO RUBIO Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1028918.55

Date of Public Distribution/Dissemination
01 / 25 / 2016
Amount
5233.36
Transaction ID : SE.4345
Date of Disbursement or Obligation
01 / 22 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 11888.88
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
J. Matthew Yuskewich
[Electronically Filed]
Date 02 / 20 / 2016
Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 26 / 2016</b>
Mailing Address <b>750 Cross Pointe Blvd</b>	Amount <span style="border: 1px solid black; padding: 2px;">231.76</span>
City <b>Gahanna</b> State <b>OH</b> Zip Code <b>43230</b>	<b>Transaction ID : SE.5204</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 27 / 2016</b>
Purpose of Expenditure <b>MAIL</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <b>MARCO RUBIO</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>      </u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1029150.31</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>                                  </u>

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 26 / 2016</b>
Mailing Address <b>750 Cross Pointe Blvd</b>	Amount <span style="border: 1px solid black; padding: 2px;">1285.29</span>
City <b>Gahanna</b> State <b>OH</b> Zip Code <b>43230</b>	<b>Transaction ID : SE.5205</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 27 / 2016</b>
Purpose of Expenditure <b>MAIL</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <b>JEB BUSH</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>      </u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1030435.60</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>                                  </u>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1517.05</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**02 / 20 / 2016**

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 26 / 2016</b>
Mailing Address <b>750 Cross Pointe Blvd</b>	Amount <span style="border: 1px solid black; padding: 2px;">4877.43</span>
City <b>Gahanna</b> State <b>OH</b> Zip Code <b>43230</b>	<b>Transaction ID : SE.5206</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 27 / 2016</b>
Purpose of Expenditure <b>MAIL</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>DONALD J TRUMP</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b> District: <b> </b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1035313.03</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <b>2016</b>

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 26 / 2016</b>
Mailing Address <b>750 Cross Pointe Blvd</b>	Amount <span style="border: 1px solid black; padding: 2px;">97008.01</span>
City <b>Gahanna</b> State <b>OH</b> Zip Code <b>43230</b>	<b>Transaction ID : SE.5207</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> <b>01 / 27 / 2016</b>
Purpose of Expenditure <b>MAIL</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>JOHN R KASICH</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b> District: <b> </b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1132321.04</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <b>2016</b>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">101885.44</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**02 / 20 / 2016**

Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 28 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">7780.93</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.5224</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1218726.02</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 28 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">6748.49</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.5225</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Purpose of Expenditure MAIL	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1225474.51</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">14529.42</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
DONALD J TRUMP Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1242852.58

Date of Public Distribution/Dissemination
01 / 28 / 2016
Amount
17378.07
Transaction ID : SE.5226
Date of Disbursement or Obligation
01 / 29 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
King Strategic Communications, Inc.
Mailing Address
750 Cross Pointe Blvd
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MAIL Category/
Type
Name of Federal Candidate
CHRISTOPHER J CHRISTIE Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1246756.38

Date of Public Distribution/Dissemination
01 / 28 / 2016
Amount
3903.80
Transaction ID : SE.5227
Date of Disbursement or Obligation
01 / 29 / 2016
Office Sought:
House District:
Senate State: NH
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21281.87
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
J. Matthew Yuskewich
[Electronically Filed]
Date 02 / 20 / 2016
Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 28 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">6561.40</span>
City Gahanna State OH Zip Code 43230	<b>Transaction ID : SE.5228</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Purpose of Expenditure MAIL Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate MARCO RUBIO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1253317.78</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>King Strategic Communications, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 28 / 2016
Mailing Address 750 Cross Pointe Blvd	Amount <span style="border: 1px solid black; padding: 2px;">7330.53</span>
City Gahanna State OH Zip Code 43230	<b>Transaction ID : SE.5229</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2016
Purpose of Expenditure MAIL Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate JEB BUSH <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1260648.31</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">13891.93</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="float:right">20000.00</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4267</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Purpose of Expenditure Media Buy	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <span style="float:right">201500.00</span>

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="float:right">140250.00</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4268</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Purpose of Expenditure Media Buy	Category/Type <span style="float:right">[ ]</span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>MA</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <span style="float:right">140250.00</span>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">340250.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right">[ ]</span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">[ ]</span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 04 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="border: 1px solid black; padding: 2px;">8500.00</span>
City State Zip Code Gahanna OH 43230	
Purpose of Expenditure Media Buy	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8500.00</span>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VT</u>
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE.4269**

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 12 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="border: 1px solid black; padding: 2px;">190000.00</span>
City State Zip Code Gahanna OH 43230	
Purpose of Expenditure Media Buy	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">392600.00</span>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE.4280**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">198500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich*

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 12 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="border: 1px solid black; padding: 2px;">168944.95</span>
City State Zip Code Gahanna OH 43230	
Purpose of Expenditure Media Buy	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MA</u>
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">309194.95</span> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE.4281**

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 12 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="border: 1px solid black; padding: 2px;">10000.00</span>
City State Zip Code Gahanna OH 43230	
Purpose of Expenditure Media Buy	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VT</u>
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">18500.00</span> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

**Transaction ID : SE.4282**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">178944.95</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
New Day Media, LLC
Mailing Address
501 Morrison Road
Suite 201
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MEDIA BUY
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: NH
Calendar Year-To-Date
Per Election for Office Sought
646808.04

Date of Public Distribution/Dissemination
01 / 18 / 2016
Amount
223200.00
Transaction ID : SE.4296
Date of Disbursement or Obligation
01 / 19 / 2016
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
New Day Media, LLC
Mailing Address
501 Morrison Road
Suite 201
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MEDIA BUY
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: VT
Calendar Year-To-Date
Per Election for Office Sought
30590.00

Date of Public Distribution/Dissemination
01 / 18 / 2016
Amount
12090.00
Transaction ID : SE.4297
Date of Disbursement or Obligation
01 / 19 / 2016
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 235290.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.

J. Matthew Yuskewich
[Electronically Filed]
Date
02 / 20 / 2016
Signature

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00581868       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          01 / 18 / 2016       </div>
Mailing Address 501 Morrison Road Suite 201	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          136710.00       </div>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4298</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          01 / 19 / 2016       </div>
Purpose of Expenditure MEDIA BUY	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: MA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          445904.95       </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          01 / 21 / 2016       </div>
Mailing Address 501 Morrison Road Suite 201	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          237800.00       </div>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.4326</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          01 / 22 / 2016       </div>
Purpose of Expenditure MEDIA BUY	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          980094.15       </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          374510.00       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          _____       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M M M / D D D D / Y Y Y Y Y Y</span>          _____       </div>

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.

*J. Matthew Yuskewich*  
 Signature

[Electronically Filed]    Date 
M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
New Day Media, LLC
Mailing Address
501 Morrison Road
Suite 201
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MEDIA BUY
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: MA
Calendar Year-To-Date
Per Election for Office Sought
645904.95

Date of Public Distribution/Dissemination
01 / 21 / 2016
Amount
20000.00
Transaction ID : SE.4327
Date of Disbursement or Obligation
01 / 22 / 2016
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
New Day Media, LLC
Mailing Address
501 Morrison Road
Suite 201
City
Gahanna State
OH Zip Code
43230
Purpose of Expenditure
MEDIA BUY
Category/Type
Name of Federal Candidate
JOHN R KASICH
Support
Office Sought:
President
State: VT
Calendar Year-To-Date
Per Election for Office Sought
43840.00

Date of Public Distribution/Dissemination
01 / 21 / 2016
Amount
13250.00
Transaction ID : SE.4328
Date of Disbursement or Obligation
01 / 22 / 2016
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 213250.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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.
J. Matthew Yuskewich
[Electronically Filed]
Date 02 / 20 / 2016
Signature



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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>01 / 27 / 2016</b>
Mailing Address 501 Morrison Road Suite 201	Amount <b>10550.00</b>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.5216</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>01 / 28 / 2016</b>
Purpose of Expenditure Media Buy	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>VT</b>
Calendar Year-To-Date Per Election for Office Sought <b>54390.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>01 / 27 / 2016</b>
Mailing Address 501 Morrison Road Suite 201	Amount <b>50475.00</b>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.5217</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>01 / 28 / 2016</b>
Purpose of Expenditure Media Buy	Category/Type
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <b>1210945.09</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>61025.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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.

*J. Matthew Yuskewich*      **[Electronically Filed]**      Date **02 / 20 / 2016**

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>New Day for America</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00581868
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>New Day Media, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 27 / 2016
Mailing Address 501 Morrison Road Suite 201	Amount <span style="border: 1px solid black; padding: 2px;">136775.00</span>
City State Zip Code Gahanna OH 43230	<b>Transaction ID : SE.5218</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 28 / 2016
Purpose of Expenditure Media Buy	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: MA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">782679.95</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>RING, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 21 / 2016
Mailing Address PO BOX 207	Amount <span style="border: 1px solid black; padding: 2px;">40193.58</span>
City State Zip Code DUBLIN OH 43017	<b>Transaction ID : SE.4322</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 21 / 2016
Purpose of Expenditure PHONES	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate JOHN R KASICH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">742294.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">176968.58</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*J. Matthew Yuskewich* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
New Day for America
FEC IDENTIFICATION NUMBER
C C00581868
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
RING, LLC
Mailing Address
PO BOX 207
City
DUBLIN State
OH Zip Code
43017
Date of Public Distribution/Dissemination
01 / 27 / 2016
Amount
28149.05
Transaction ID : SE.5208
Date of Disbursement or Obligation
01 / 27 / 2016
Purpose of Expenditure
PHONES Category/Type
Name of Federal Candidate
JOHN R KASICH Support
Office Sought: President State: NH
Calendar Year-To-Date
Per Election for Office Sought
1160470.09
Disbursement For: Primary
2016

Full Name of Payee
Mailing Address
City
State
Zip Code
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Office Sought:
Disbursement For:
Calendar Year-To-Date
Per Election for Office Sought

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 28149.05, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 2148718.26

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.

J. Matthew Yuskewich
[Electronically Filed]
Date
02 / 20 / 2016
Signature