



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="25757.50"/>	<input type="text" value="25757.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="50750.48"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="9905.00"/>	<input type="text" value="43660.00"/>
(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="60655.48"/>	<input type="text" value="69417.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20856.24"/>	<input type="text" value="29618.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="39799.24"/>	<input type="text" value="39799.24"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9745.00	25325.00
(ii) Unitemized .....	160.00	3335.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9905.00	28660.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	9905.00	43660.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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))..... ▶	9905.00	43660.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9905.00	43660.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	356.24	618.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	356.24	618.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20500.00	29000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20856.24	29618.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20856.24	29618.26

**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) .....	9905.00	43660.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9905.00	43660.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	356.24	618.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	356.24	618.26



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. West Central Cooperative**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 68  
 City Ralston State IA Zip Code 51459-0068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015  
**Transaction ID : A07FCEA1B05FB4B1596F**  
 Amount of Each Receipt this Period  
 2000.00

**B. Robert Engel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 988 Preston Ct  
 City Castle Rock State CO Zip Code 80108-9176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015  
**Transaction ID : AA0B9DC387BB24A8F884**  
 Amount of Each Receipt this Period  
 1500.00

**C. Mary E McBride**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 S Quebec St  
 City Englewood State CO Zip Code 80111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Chief Banking Officer  
 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  
 03 / 26 / 2015  
**Transaction ID : A5C2C7A7C2EDF488DAE4**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<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 8 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. Todd VanHoose**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 606 Kings Cloister Cir  
 City Alexandria State VA Zip Code 22302-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cobank Occupation Senior Vice President, Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2015  
**Transaction ID : AACCFEDE492740BDA12**  
 Amount of Each Receipt this Period  
 3500.00

**B. Raleigh Ward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3762 Ward Rd  
 City Effingham State SC Zip Code 29541-5343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Southern States Cooperative, Inc. Occupation Chairman of the Board  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2015  
**Transaction ID : A2F875B5ACF6F42C19F7**  
 Amount of Each Receipt this Period  
 70.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3570.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9745.00

**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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Suntrust Bank**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2015

Transaction ID : BCB07D2B4A70E48D6ACF

Amount of Each Disbursement this Period

332.31

Full Name (Last, First, Middle Initial)

**B. Suntrust Bank**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement  
Account Analysis Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : B8C536867768942C69AB

Amount of Each Disbursement this Period

23.93

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

356.24

356.24

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Peterson For Congress**

Mailing Address 236 Massachusetts Ave NE  
Suite 603

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Collin C. Peterson**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MN District: 07

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2015

Transaction ID : **B45A1769BBF47475CAA4**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. DELBENE FOR CONGRESS**

Mailing Address PO BOX 487

City BOTHELL State WA Zip Code 98041

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Suzan K. DelBene**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: WA District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2015

Transaction ID : **B7B80F4616D18455FAA1**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Gibbs for Congress**

Mailing Address 217 Third St SE

City Washington DC State DC Zip Code 20003

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Bob B. Gibbs**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: OH District: 07

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2015

Transaction ID : **B8A2F53AC97A149E7BE3**

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Graves For Congress**

Mailing Address 4701 Nw 82nd Street

City Kansas City State MO Zip Code 64151-1102

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Sam B. GRAVES Jr.**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MO District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2015

Transaction ID : **B8DD36A905E9C484BB9A**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Kevin Mccarthy For Congress**

Mailing Address P.o. Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Kevin McCarthy**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 23

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2015

Transaction ID : **B81E1AC6935144851B96**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Roberts For Senate**

Mailing Address Po Box 433

City Great Bend State KS Zip Code 67530

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Sen. Pat Roberts**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: KS District:

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2015

Transaction ID : **B6922F6A8D38F429790C**

Amount of Each Disbursement this Period

1000.00

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

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

5500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Costa For Congress**

Mailing Address 2037 West Bullard  
Pmb # 509

City Fresno State CA Zip Code 93711-1200

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rep. Jim Costa**

Office Sought:  House  
 Senate  
 President  
State: CA District: 16

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2015

**Transaction ID : B67AF76D5171746739D7**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Walden For Congress**

Mailing Address Po Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rep. Greg P. Walden**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2015

**Transaction ID : B2417044CE32D41499A8**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Tim Walz For Us Congress**

Mailing Address Po Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rep. Tim J. Walz**

Office Sought:  House  
 Senate  
 President  
State: MN District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2015

**Transaction ID : B653BEDDC2FE54ED6BBI**

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Denham for Congress**

Mailing Address PO BOX 368

City Falls Church State VA Zip Code 22040-0368

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rep. Jeff Denham**

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2015

**Transaction ID : B33FCA28B6AC949FEA3E**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DAN NEWHOUSE FOR CONGRESS**

Mailing Address PO BOX 10949

City YAKIMA State WA Zip Code 98909

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Daniel Milton Newhouse**

Office Sought:  House  
 Senate  
 President  
State: WA District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2015

**Transaction ID : BD414E6605E1E464A9F9**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF CHERI BUSTOS**

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement  
Contribution to Committee

Candidate Name

**Rep. Cheri L. Bustos**

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2015

**Transaction ID : B573A159ECE16433D950**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

20500.00