

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Foundation for a Greater America INC

ADDRESS (number and street) PO Box 3587 Tustin CA 92781 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00555862 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (X), Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mr. James P Hodgins

Signature of Treasurer Mr. James P Hodgins [Electronically Filed] Date 07 / 31 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Foundation for a Greater America INC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		123287.24
(b) Cash on Hand at Beginning of Reporting Period.....	123287.24	
(c) Total Receipts (from Line 19) .....	415694.36	415694.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	538981.60	538981.60
7. Total Disbursements (from Line 31).....	310052.00	310052.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	228929.60	228929.60
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	185304.06	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	507063.29	

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

**Foundation for a Greater America INC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7690.16	7690.16
(ii) Unitemized .....	21564.42	21564.42
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	29254.58	29254.58
(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) .....	29254.58	29254.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	319305.00	319305.00
14. Loan Repayments Received.....	67134.78	67134.78
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))..... ▶	415694.36	415694.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	415694.36	415694.36

**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 .....	84452.00	84452.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	84452.00	84452.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	147000.00	147000.00
27. Loans Made.....	78600.00	78600.00
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)) ..	310052.00	310052.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	310052.00	310052.00

**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) .....	29254.58	29254.58
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29254.58	29254.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	84452.00	84452.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	84452.00	84452.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Foundation for a Greater America INC**

**A. Nancy Sever**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 SW 25TH BLVD, UNIT 1200

City Gainesville	State FL	Zip Code 32608-8918
---------------------	-------------	------------------------

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

Name of Employer None	Occupation retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2015  
**Transaction ID : A14184455857B42208BF**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5200 SW 25TH BLVD, UNIT 1200

City Gainesville	State FL	Zip Code 32608-8918
---------------------	-------------	------------------------

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

Name of Employer None	Occupation retired
--------------------------	-----------------------

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  
 04 / 16 / 2015  
**Transaction ID : A71C62E74409B4D51BBA**

Amount of Each Receipt this Period  
500.00

**C. Thomas Wickham**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 928

City Cutchogue	State NY	Zip Code 11935-0928
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FEC ID number of contributing federal political committee. **C**

Name of Employer City	Occupation retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2015  
**Transaction ID : A81CE100BCFBD4AFC922**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<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 7 OF 97
	<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

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. Thomas Wickham**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 928

City Cutchogue State NY Zip Code 11935-0928

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

Name of Employer Occupation  
City retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 17 / 2015

**Transaction ID : A5E854E954FA7488A848**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 2255 armstrong ct sw

City Conyers State GA Zip Code 30094-4207

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

Name of Employer Occupation  
retired computers

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 20 / 2015

**Transaction ID : A9CD21020424C49CAAE3**

Amount of Each Receipt this Period  
500.00

**c. Mr. ralph fressola**  
Full Name (Last, First, Middle Initial)

Mailing Address 2255 armstrong ct sw

City Conyers State GA Zip Code 30094-4207

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

Name of Employer Occupation  
retired computers

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  
04 / 20 / 2015

**Transaction ID : AE8842FF6004F4731B0D**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<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 97
	(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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)  
**A. Margaret M Pugh**

Mailing Address 1011 D Street

City Juneau State AK Zip Code 99801-1835

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

Name of Employer State of Alaska, retired Occupation Commissioner, retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 21 / 2015**

**Transaction ID : A73E832D7FD074EEDAAE**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 12758 County Road 501

City Bayfield State CO Zip Code 81122-8706

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

Name of Employer self Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 22 / 2015**

**Transaction ID : A2C60913F35A742B8954**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**C. Gregory Meyer**

Mailing Address 6733 leopard st

City Corpus Christi State TX Zip Code 78409-1701

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

Name of Employer Meyer Oil Field Services Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 29 / 2015**

**Transaction ID : AB0FFA2DE14F94B6DA6A**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1400.00</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 9 OF 97
	<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

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. Joselito S Cimarra**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5108 Adnian Court

City Antioch	State CA	Zip Code 94531
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cimarra FamilyCare Homes, LLC	Occupation executive
---	-------------------------

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
05	/	19	/	2015

**Transaction ID : A71D7CDCACB2045BBB3**

Amount of Each Receipt this Period  
250.00

VotersforHillary.com

**B. Eric M. Shooter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 370 Golden Oak Drive

City Portola Valley	State CA	Zip Code 94028-7757
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2015

**Transaction ID : AC68316B293BC476BB94**

Amount of Each Receipt this Period  
500.00

VotersforHillary.com

**C. Mrs. Lois Carpenter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12758 County Road 501

City Bayfield	State CO	Zip Code 81122-8706
------------------	-------------	------------------------

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

Name of Employer self	Occupation retired
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2015

**Transaction ID : AFCD2559813C34B29B20**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<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 10 OF 97
	<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)  
**Foundation for a Greater America INC**

**A. Lois E Maggio**  
Full Name (Last, First, Middle Initial)

Mailing Address 237 Harvest Lane

City Morgan Hill	State CA	Zip Code 95037-6125
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FEC ID number of contributing federal political committee. **C**

Name of Employer unemployed	Occupation retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2015

**Transaction ID : A52EAA70A3A8F499EBC8**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 237 Harvest Lane

City Morgan Hill	State CA	Zip Code 95037-6125
---------------------	-------------	------------------------

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

Name of Employer unemployed	Occupation retired
--------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1020.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2015

**Transaction ID : A9EF147EF07594D4484E**

Amount of Each Receipt this Period  
20.00

**C. Norma Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 1308 lasuen Dr

City Millbrae	State CA	Zip Code 94030-2846
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation education
-----------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AAF62082FA0FE4F4AA0B**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1520.00
<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 97
	<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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)  
**A. Jeanine C Dendy**

Mailing Address 2329 Hill St

City Alexandria State LA Zip Code 71301-5118

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

Name of Employer: retired Occupation: education

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **06 / 11 / 2015**

**Transaction ID : ABD77C925BB374B48B5A**

Amount of Each Receipt this Period: **400.00**

Full Name (Last, First, Middle Initial)  
**B. Imperial Express Financial Services**

Mailing Address 1495 North Hampton Road Suite D

City Desoto State TX Zip Code 75115-3037

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **20.16**

Date of Receipt: **06 / 15 / 2015**

**Transaction ID : A3814F30F4ED4429AAAE**

Amount of Each Receipt this Period: **20.16**

VotersforHillary.com

Full Name (Last, First, Middle Initial)  
**C. bennie roundtree**

Mailing Address 602 bonners lane

City Greenville State NC Zip Code 27834-3114

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

Name of Employer: Roundtree Real estate Occupation: Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **06 / 16 / 2015**

**Transaction ID : AA5E5771DC5EA443AAE8**

Amount of Each Receipt this Period: **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **520.16**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 97
	<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)  
**Foundation for a Greater America INC**

**A. Arlene Solomon**  
Full Name (Last, First, Middle Initial)

Mailing Address 5507 East El Cedral Street

City Long Beach State CA Zip Code 90815-4113

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 25 / 2015  
**Transaction ID : ACAC1BBE11E3F4A70972**

Amount of Each Receipt this Period  
250.00

VotersforHillary.com

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

Mailing Address 333 N Palm Dr apt 105

City Beverly Hills State CA Zip Code 90210-5912

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

Name of Employer retired Occupation ass worker non- profit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 25 / 2015  
**Transaction ID : A39F744BFB7E14FB2AB1**

Amount of Each Receipt this Period  
250.00

**C. Rose Mary Ross**  
Full Name (Last, First, Middle Initial)

Mailing Address 1422 Zero Gordo St

City Los Angeles State CA Zip Code 90026

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

Name of Employer professor Occupation professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 26 / 2015  
**Transaction ID : ADA58A2371F6C43C194C**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7690.16

**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 97
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input checked="" 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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial) <b>A. CrossClick Media, Inc.(CCM2)</b>		Date of Receipt
Mailing Address 8725 S. Eastern Ave Suite 200-661		<input type="text" value="01"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code
Las Vegas	NV	89123-3243
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2483C8ED27404C88925</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	loan to cover shortfall to ensure no o/d fee
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5.00"/>	

Full Name (Last, First, Middle Initial) <b>B. CrossClick Media, Inc.(CCM2)</b>		Date of Receipt
Mailing Address 8725 S. Eastern Ave Suite 200-661		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City	State	Zip Code
Las Vegas	NV	89123-3243
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : AB8D43C5F6C264142931</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="10600.00"/>
Receipt For:	Aggregate Year-to-Date ▼	loan to help defray costs
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="69305.00"/>	

Full Name (Last, First, Middle Initial) <b>c. CrossClick Media, Inc.(CCM2)</b>		Date of Receipt
Mailing Address 8725 S. Eastern Ave Suite 200-661		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code
Las Vegas	NV	89123-3243
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : AF837026A5C944213AA7</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="26500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	borrowing to make higher cost debt payments
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="58705.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="37105.00"/>
<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 14 OF 97
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" 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)  
**Foundation for a Greater America INC**

**A. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 58705.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2015  
**Transaction ID : AD58E7F894DE94D439DA**  
 Amount of Each Receipt this Period  
 19000.00  
 fund new ofc exp - dep and 1st mo rent

**B. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 58705.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2015  
**Transaction ID : A9659CAF7BA3643F58E3**  
 Amount of Each Receipt this Period  
 13200.00  
 borrowing to make other debt pay at higher cost

**C. Judson A Church**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 764 Pines Lake Drive West  
 City Wayne State NJ Zip Code 07470-6106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self investor  
 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 / 27 / 2015  
**Transaction ID : AD5BA6E5FC76D48779D4**  
 Amount of Each Receipt this Period  
 250000.00  
 provide liquidity during pre announce for Hillary

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	282200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	319305.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4023.00

Date of Receipt  
 05 / 20 / 2015  
**Transaction ID : ABFE3C97C13404292A10**  
 Amount of Each Receipt this Period  
 5.00  
 Paid in full - loan dtd 1/6/15 - still owe interest

**B. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2650.00

Date of Receipt  
 05 / 07 / 2015  
**Transaction ID : A377EF403440E4974968**  
 Amount of Each Receipt this Period  
 500.00  
 partial repay of loan dtd 12/17/14 - leave bal of \$650

**c. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1400.00

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : AA80080ABA38C4F479AC**  
 Amount of Each Receipt this Period  
 400.00  
 partial pay on loan dtd 12/17 of \$400 leaves bal of \$1900

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	905.00
<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 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : A72B9BB4401F24686BDC**  
 Amount of Each Receipt this Period  
 450.00  
 pay down on loan dated 12/17 - leaving bal of \$2300

**B. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2015  
**Transaction ID : AD6F60CE547284A58A40**  
 Amount of Each Receipt this Period  
 750.00  
 partial repay of loan dtd 12/17/15 - leaving bal of \$1150

**c. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20011.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : A885B28DB26044CF5B57**  
 Amount of Each Receipt this Period  
 860.00  
 partial loan repay

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2060.00
<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 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4023.00

Date of Receipt  
 05 / 20 / 2015  
**Transaction ID : A44E7C163053242B4A8D**  
 Amount of Each Receipt this Period  
 60.00  
 Full pay of loan dtd 12/30/14 for \$60 - still due interest

**B. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 23011.78

Date of Receipt  
 05 / 04 / 2015  
**Transaction ID : AF79737B486E748DAAA0**  
 Amount of Each Receipt this Period  
 3000.00  
 partial loan repayment

**c. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4023.00

Date of Receipt  
 05 / 20 / 2015  
**Transaction ID : AA27BE5B94170421F90C**  
 Amount of Each Receipt this Period  
 658.00  
 partial repayment of loan dtd 5/13/15 \$26,500 - leaves bal of \$25,842

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3718.00
<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 18 OF 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2015  
**Transaction ID : A1037CBA1EBBE460B917**  
 Amount of Each Receipt this Period  
 2300.00  
 partial loan repayment from Finiks

**B. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4023.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2015  
**Transaction ID : A7B5D85AD5D944633812**  
 Amount of Each Receipt this Period  
 650.00  
 final pay of loan dtd 12/17/14 for \$3700 - paid \$650 bal - still owe int

**c. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 19151.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2015  
**Transaction ID : AB5F30FBA982E4986B3C**  
 Amount of Each Receipt this Period  
 2455.84  
 partial loan repayment from Finiks

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5405.84
<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 19 OF 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. CrossClick Media, Inc.(CCM2)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8725 S. Eastern Ave  
 Suite 200-661  
 City Las Vegas State NV Zip Code 89123-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : AA00ED6C78181477EADE**  
 Amount of Each Receipt this Period  
 550.00  
 partial repay of loan dtd 12/17/14 \$550 - leaves bal due \$2750

**B. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 23461.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2015  
**Transaction ID : A3C5EAE1195114F5BBC4**  
 Amount of Each Receipt this Period  
 450.00

**c. (2) Finiks Capital, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14092  
 City Westminster State CA Zip Code 92683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 19151.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2015  
**Transaction ID : A55114BFDB98A4233B73**  
 Amount of Each Receipt this Period  
 14395.94  
 partial repayment from Finiks to FFAGA

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15395.94
<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 20 OF 97
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

**A. Judson A Church**  
Full Name (Last, First, Middle Initial)  
Mailing Address 764 Pines Lake Drive West

City Wayne	State NJ	Zip Code 07470-6106
---------------	-------------	------------------------

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

Name of Employer self	Occupation investor
--------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
39650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

**Transaction ID : AB538EB82A8084DC6821**

Amount of Each Receipt this Period  
26450.00

schedule loan repayment due

**B. Judson A Church**  
Full Name (Last, First, Middle Initial)  
Mailing Address 764 Pines Lake Drive West

City Wayne	State NJ	Zip Code 07470-6106
---------------	-------------	------------------------

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

Name of Employer self	Occupation investor
--------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

**Transaction ID : AB4CF49E269294122A76**

Amount of Each Receipt this Period  
13200.00

make scheduled partial loan repayment

**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).....▶	39650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	67134.78

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
US Bank Extended O/D Fee \$25.00

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2015

Transaction ID : BE04D4471B5914B1FA5E

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
US Bank Extended O/D Fee \$25.00

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2015

Transaction ID : B9D935C37429A4C80976

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement  
software services for ofc 365 word/excel/etc.

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2015

Transaction ID : B5426000ABFCE442B8AE

Amount of Each Disbursement this Period

140.00

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

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

190.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. United States Post Office (USPS)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2015

Mailing Address 3101 West Sunflower

**Transaction ID : B0101D8EB38384FCA807**

City Santa Ana State CA Zip Code 92799-0101

Amount of Each Disbursement this Period

11.00
-------

Purpose of Disbursement stamps for mailing office supplies

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

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2015

Mailing Address 3131 South Vaughn Way Suite 350

**Transaction ID : BF313A7B9F4E04866A6F**

City Aurora State CO Zip Code 80014-3503

Amount of Each Disbursement this Period

22.50
-------

Purpose of Disbursement Credit Card Processing Fees

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

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2015

Mailing Address 3131 South Vaughn Way Suite 350

**Transaction ID : BBC22D86C8DD74BF18FF**

City Aurora State CO Zip Code 80014-3503

Amount of Each Disbursement this Period

29.00
-------

Purpose of Disbursement Credit Card Processing Fees

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

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

62.50
-------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2015

Transaction ID : B66A85CB03C2F4364A32

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2015

Transaction ID : BE126A5BF90944D0481D

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
VOID - Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2015

Transaction ID : BC0D62F522D654FB8AF5

Amount of Each Disbursement this Period

-18.88

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

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

21.12

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
credit card processing

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
02		19		2015

Transaction ID : B762A0EF679B245A2A06

Amount of Each Disbursement this Period

200	.	00
-----	---	----

Full Name (Last, First, Middle Initial)

**B. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement  
software services for Ofc 365 word, excel, etc.

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
03		03		2015

Transaction ID : B9464414F631945F7B26

Amount of Each Disbursement this Period

140	.	00
-----	---	----

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
Merchant Bank Processing Fees

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
03		10		2015

Transaction ID : B99171D519D384903976

Amount of Each Disbursement this Period

200	.	00
-----	---	----

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

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

200	.	00
-----	---	----

200	.	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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking for card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : B2871117D76E84F959B1

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : BAE534F3B69224560A59

Amount of Each Disbursement this Period

27.55

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking fee for card processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : BA96BB38D8E1F40D18F0

Amount of Each Disbursement this Period

21.23

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

68.78

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant bank processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : B3C349226184342CC92A

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bank service charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2015

Transaction ID : B178BC1B94DD14DCB8E3

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

**C. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement  
software services for ofc 365 word / excel etc

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2015

Transaction ID : BBBD3B11EB8454068BBE

Amount of Each Disbursement this Period

140.00

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

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

165.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking for card processing

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
04	/	02	/	2015

Transaction ID : B74605DC44C2E48EBB4A

Amount of Each Disbursement this Period

2.10
------

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant bank processing fees

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
04	/	10	/	2015

Transaction ID : B6E57B9FC641C46D9ACE

Amount of Each Disbursement this Period

21.45
-------

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant bank processing fees

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
04	/	10	/	2015

Transaction ID : B4A2FFB8070F24567A11

Amount of Each Disbursement this Period

24.83
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

48.38
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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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking processing fees

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
04		10		2015

Transaction ID : **B8CF1FF8011B44F09868**

Amount of Each Disbursement this Period

20.00
-------

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant bank processing fees

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
04		10		2015

Transaction ID : **B3D4C86EB370E4E76BAB**

Amount of Each Disbursement this Period

29.75
-------

Full Name (Last, First, Middle Initial)

**C. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
monthly bank service charge

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
04		14		2015

Transaction ID : **BA27756C3F535435B8D6**

Amount of Each Disbursement this Period

5.00
------

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

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

54.75
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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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bank for mailing pledge letters for Hillary campaign

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2015

Transaction ID : BEF71FDDC771F434187A

Amount of Each Disbursement this Period

44.00

Full Name (Last, First, Middle Initial)

**B. United States Post Office (USPS)**

Mailing Address 3101 West Sunflower

City Santa Ana State CA Zip Code 92799-0101

Purpose of Disbursement  
stamp purchase for pledge letters for votersforhillary.com

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2015

Transaction ID : BFC593C534A3D4B9CAA0

Amount of Each Disbursement this Period

98.00

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial paydown of debt

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2015

Transaction ID : BFBE69954585B4E6BA27

Amount of Each Disbursement this Period

2800.00

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

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

2942.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial) <b>A. CrossClick Media, Inc.(CCM2)</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2015
Mailing Address 8725 S. Eastern Ave Suite 200-661		<b>Transaction ID : B0A3DF16C0C4E4B41994</b>
City Las Vegas	State NV	
Zip Code 89123-3243	Purpose of Disbursement partial debt repayment	Amount of Each Disbursement this Period 2900.00
Candidate Name	Category/Type	
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. CrossClick Media, Inc.(CCM2)</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2015
Mailing Address 8725 S. Eastern Ave Suite 200-661		<b>Transaction ID : B3D42E4A8ECCE4FC782F</b>
City Las Vegas	State NV	
Zip Code 89123-3243	Purpose of Disbursement partial debt repayment	Amount of Each Disbursement this Period 17000.00
Candidate Name	Category/Type	
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. CrossClick Media, Inc.(CCM2)</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2015
Mailing Address 8725 S. Eastern Ave Suite 200-661		<b>Transaction ID : B1354AEC33AAB4CE6AF7</b>
City Las Vegas	State NV	
Zip Code 89123-3243	Purpose of Disbursement partial debt repay	Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/Type	
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).....▶	22900.00
<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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement software services for Ofc 365 word, excel, etc.

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

Transaction ID : BFCFB9576CCF042CFB09

Amount of Each Disbursement this Period

140.00

Full Name (Last, First, Middle Initial)

**B. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement various computer program package for business operations

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

Transaction ID : B0BAC0CC79DE04AF3A14

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement partial repay of debt

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

Transaction ID : B6B94576C4614410DBA7

Amount of Each Disbursement this Period

2150.00

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

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

2298.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
bad chk chg from processor fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

Transaction ID : B5113EA32F3804AE7B14

Amount of Each Disbursement this Period

7.10

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
bad chk chg from processor

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2015

Transaction ID : B1BC828170A2A451A8DF

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial debt repay

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 06 / 2015

Transaction ID : BB7F7DAF8B3884A38A0E

Amount of Each Disbursement this Period

700.00

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

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

708.10



**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial repay of debt

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2015

**Transaction ID : B201F457B3AC441DB8DF**

Amount of Each Disbursement this Period

1275.00

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial debt repay

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2015

**Transaction ID : B86620079E5DE4842BC1**

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
bad chk chg for \$50 - fees chgd earlier

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2015

**Transaction ID : B4F832568920E46E194F**

Amount of Each Disbursement this Period

50.00

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

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

1775.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **B57B88FD0E1E244F5B21**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **BED1FAF359B10446DBBD**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **B15681C093A78491DB4D**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
credit card processing fees

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  
05 / 11 / 2015

Transaction ID : **B89EC16B8B6E143DB818**

Amount of Each Disbursement this Period

83.92

Full Name (Last, First, Middle Initial)

**B. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
o/d fee for bounced check

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  
05 / 13 / 2015

Transaction ID : **BF526A381A3634EA988A**

Amount of Each Disbursement this Period

36.00

Full Name (Last, First, Middle Initial)

**C. Pacific West Asset Management Corp**

Mailing Address c/o Pacific West Asset Mgmt  
PO Box 19068

City Irvine State CA Zip Code 92623-9068

Purpose of Disbursement  
1st mos rent \$2,828

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  
05 / 13 / 2015

Transaction ID : **B38993773154E4B5085D**

Amount of Each Disbursement this Period

2828.00

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

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

2947.92

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Pacific West Asset Management Corp**

Date of Disbursement: MM / DD / YYYY  
05 / 13 / 2015

Mailing Address: c/o Pacific West Asset Mgmt  
PO Box 19068

City: Irvine State: CA Zip Code: 92623-9068

Purpose of Disbursement: deposit for addl space in Costa Mesa, CA

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **BB0DA7570BE9144E6951**

Amount of Each Disbursement this Period: 15000.00

Full Name (Last, First, Middle Initial)

**B. CSC - Corporation Service Company**

Date of Disbursement: MM / DD / YYYY  
05 / 14 / 2015

Mailing Address: PO Box 13397

City: Philadelphia State: PA Zip Code: 19101-3397

Purpose of Disbursement: partial repayment of debt owed by committee

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **B4CE82329F14543E4B7E**

Amount of Each Disbursement this Period: 200.00

Full Name (Last, First, Middle Initial)

**C. US Bank**

Date of Disbursement: MM / DD / YYYY  
05 / 14 / 2015

Mailing Address: 16061 Brookhurst Street

City: Fountain Valley State: CA Zip Code: 92708-1544

Purpose of Disbursement: monthly serv chg

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **B84736A34EC854D8D95E**

Amount of Each Disbursement this Period: 5.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15205.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
Stamps bot at US Bk ATM for v4h campaign

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **B9FCE960D4D8340D7B1B**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
compliance consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **BB30FEC08F9EE48C59A3**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
compliance consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **B8761A47A0E6C490A88E**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps for v4h campaign

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
05		26		2015

Transaction ID : B1D899C63A9BE4FD2AD3

Amount of Each Disbursement this Period

44.00
-------

Full Name (Last, First, Middle Initial)

**B. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bk for v4h campaign

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
05		28		2015

Transaction ID : B24C69CC0EEA04DB0B02

Amount of Each Disbursement this Period

44.00
-------

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial debt repay

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
05		29		2015

Transaction ID : BBA579D53FEF644B383F

Amount of Each Disbursement this Period

700.00
--------

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

788.00
--------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bk for v4h campaign

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2015

Transaction ID : **BB473F951954B44049D2**

Amount of Each Disbursement this Period

33.00

Full Name (Last, First, Middle Initial)

**B. Houstons**

Mailing Address 2991 Michelson Drive

City Irvine State CA Zip Code 92612-0623

Purpose of Disbursement  
MEAL - Ault, Hodgins & Spaziano - discussed NPO call center

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2015

Transaction ID : **BD51F7308AC3348608C6**

Amount of Each Disbursement this Period

272.00

Full Name (Last, First, Middle Initial)

**C. Microsoft Office 365**

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052-8300

Purpose of Disbursement  
software services for Ofc 365 word, excel, etc.

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2015

Transaction ID : **B41C53D4E7BFA4268A9D**

Amount of Each Disbursement this Period

140.00

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

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

445.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2015

Mailing Address 3131 South Vaughn Way  
Suite 350

**Transaction ID : B95FEC1C5938944DE9E7**

City Aurora State CO Zip Code 80014-3503

Amount of Each Disbursement this Period

9.64
------

Purpose of Disbursement  
bad chk chg

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2015

Mailing Address 3131 South Vaughn Way  
Suite 350

**Transaction ID : B67BD592EE07E4CBE8AD**

City Aurora State CO Zip Code 80014-3503

Amount of Each Disbursement this Period

215.00
--------

Purpose of Disbursement  
chg back for \$200 contrib + \$15 fee = \$215

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2015

Mailing Address 3131 South Vaughn Way  
Suite 350

**Transaction ID : BDD1A9030F2C64214B37**

City Aurora State CO Zip Code 80014-3503

Amount of Each Disbursement this Period

7.58
------

Purpose of Disbursement  
bad chk chg

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

232.22
--------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bk for v4h campaign

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
06	/	02	/	2015

Transaction ID : B8C8BAAFC686D4DE9981

Amount of Each Disbursement this Period

44.00
-------

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
charge back \$20 plus \$15 fee - \$35 total

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
06	/	09	/	2015

Transaction ID : B383BEBD1656640918B4

Amount of Each Disbursement this Period

35.00
-------

Full Name (Last, First, Middle Initial)

**C. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bk for v4h campaign

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
06	/	09	/	2015

Transaction ID : B521310E5CB334C6CBF6

Amount of Each Disbursement this Period

44.00
-------

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

123.00
--------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Date of Disbursement: MM / DD / YYYY  
06 / 10 / 2015

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement merchant banking processing fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **B99BA8E639D51400B935**

Amount of Each Disbursement this Period: 75.36

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Date of Disbursement: MM / DD / YYYY  
06 / 10 / 2015

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement merchant banking processing fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **BD05A6F86016A473DB7C**

Amount of Each Disbursement this Period: 40.36

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Date of Disbursement: MM / DD / YYYY  
06 / 10 / 2015

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement card processing fees for v4h

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **BA679C6C1AC124F89B79**

Amount of Each Disbursement this Period: 110.68

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 226.40

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
merchant banking processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 10 / 2015

Transaction ID : **BD71C42AC39F1447EB8E**

Amount of Each Disbursement this Period

161.94

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial pay on debt to CCM

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2015

Transaction ID : **B6917BFD4B44D4DAA855**

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial pay on debt to CCM

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2015

Transaction ID : **B32DFFD37577A4ADEB63**

Amount of Each Disbursement this Period

725.00

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

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

1161.94

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps at us bk for v4h campaign

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2015

Transaction ID : **B1C2473482E154C718E4**

Amount of Each Disbursement this Period

44.00

Full Name (Last, First, Middle Initial)

**B. ACI Commercial Insurance Brokers**

Mailing Address 505 East First Street  
Suite E

City Tustin State CA Zip Code 92780-3305

Purpose of Disbursement  
comm insurance for addl office space

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2015

Transaction ID : **BD2FC68F29ADD4236B72**

Amount of Each Disbursement this Period

237.50

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial pay on debt to CCM

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2015

Transaction ID : **B491DB66EC49242E1904**

Amount of Each Disbursement this Period

450.00

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

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

731.50

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
monthly bank svc chg

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  
06 / 12 / 2015

Transaction ID : **BF46D195B1FC64E438EF**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
chg back for \$15 contr plus \$15 fee = \$30

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  
06 / 15 / 2015

Transaction ID : **BDBF99EC779CC44DF91D**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C. US Bank**

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708-1544

Purpose of Disbursement  
bot stamps from ATM for mailing for v4h campaign

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  
06 / 17 / 2015

Transaction ID : **B6C79C3C071D34FAEB8B**

Amount of Each Disbursement this Period

44.00

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

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

94.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
bad chk charge

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
06	/	22	/	2015

Transaction ID : **BCBBD43D2EE464E61BEA**

Amount of Each Disbursement this Period

100.00
--------

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial pay on debt to CCM

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
06	/	24	/	2015

Transaction ID : **B990580E48E2F41A9917**

Amount of Each Disbursement this Period

675.00
--------

Full Name (Last, First, Middle Initial)

**C. TransFirst, LLC**

Mailing Address 3131 South Vaughn Way  
Suite 350

City Aurora State CO Zip Code 80014-3503

Purpose of Disbursement  
chgbak for card proc for v4h - \$10 contrib & \$15 fee = \$25

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
06	/	25	/	2015

Transaction ID : **B8A8EA3F02C7747DEBFO**

Amount of Each Disbursement this Period

25.00
-------

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

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

800.00
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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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial paydown on debt to CCM

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
06	/	26	/	2015

Transaction ID : B28CF1AB245EF49EFA48

Amount of Each Disbursement this Period

110.00
--------

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
payment versus acct invoices / owed by committee'

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
04	/	24	/	2015

Transaction ID : BE75E372BD1864EC4955

Amount of Each Disbursement this Period

760.00
--------

Full Name (Last, First, Middle Initial)

**C. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial repay versus Monthly Compliance Consulting

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	/	29	/	2015

Transaction ID : B25CCB97BEDB34A10813

Amount of Each Disbursement this Period

1325.00
---------

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

2195.00
---------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial repay versus Monthly Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2015

Transaction ID : **B65049CF176204380820**

Amount of Each Disbursement this Period

100.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial repay versus Monthly Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2015

Transaction ID : **B41F01E25086B4E6393C**

Amount of Each Disbursement this Period

75.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. Mr. Milton C Ault III**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2015

Transaction ID : **B98A782AA108440519E8**

Amount of Each Disbursement this Period

290.50

Category/Type

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

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

465.50



**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Milton C Ault III**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2015

Transaction ID : **BBC702A491A874BEA8F0**

Amount of Each Disbursement this Period

40.50

Full Name (Last, First, Middle Initial)

**B. Mr. Milton C Ault III**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 10 / 2015

Transaction ID : **BA8C35D9118DD48249CB**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C. Mr. Milton C Ault III**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consultation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2015

Transaction ID : **BF263A47D32C244BCB60**

Amount of Each Disbursement this Period

59.50

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Mary E Coons**

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement  
payment of interest on \$200,000 loan which is fully paid

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
02	/	12	/	2015

Transaction ID : **B0C23EB9407CD4CF0BCE**

Amount of Each Disbursement this Period

1418.67
---------

**B. Mr. Milton C Ault III**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consultation

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
06	/	08	/	2015

Transaction ID : **B6F25798610A347BD9C6**

Amount of Each Disbursement this Period

500.00
--------

**C. Mr. Milton C Ault III**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
Strategic Planning Consulting

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
06	/	08	/	2015

Transaction ID : **B23BF6F852A5F428BB15**

Amount of Each Disbursement this Period

209.50
--------

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

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

2128.17
---------

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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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial repay versus Monthly Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2015

Transaction ID : **B6C050D952404429F83A**

Amount of Each Disbursement this Period

675.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial repay versus Monthly Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2015

Transaction ID : **B2D3C7780790A4AF4BD3**

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Mr. James P Hodgins**

Mailing Address PO Box 3587

City Tustin State CA Zip Code 92781-3587

Purpose of Disbursement  
partial reoat vs Monthly Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2015

Transaction ID : **B315C0E642D55415A95E**

Amount of Each Disbursement this Period

300.00

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

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

1055.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2015

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

**Transaction ID : B608C1D2E5566425E99B**

City Las Vegas State NV Zip Code 89123-3243

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
paid on account - orig bal \$39,839.38

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

**Transaction ID : BE8A08E1560984F0F9ED**

City Las Vegas State NV Zip Code 89123-3243

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
partial repayment of debt - orig bal of \$39,839.38

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

**Transaction ID : BA5EDE1AABD3A4E858C**

City Las Vegas State NV Zip Code 89123-3243

Amount of Each Disbursement this Period

2650.00
---------

Purpose of Disbursement  
partial paid on account - orig bal \$39,839.38

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

6150.00
---------

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial paid on acct - orig balance \$39,839.38

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 Y
01	/	30	/	2015

**Transaction ID : B8387F6C5E6654B2CAA9**

Amount of Each Disbursement this Period

1900.00
---------

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial pay on acct - orig balance \$39,839.38

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 Y
01	/	30	/	2015

**Transaction ID : B366F55482C224F66A4A**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial repayment of debt - orig bal of \$39,839.38

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 Y
02	/	02	/	2015

**Transaction ID : BFA2535824E664ACAB34**

Amount of Each Disbursement this Period

2700.00
---------

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

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

5600.00
---------

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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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial repayment of debt - orig bal of \$39,839.38

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2015

Transaction ID : **BD2491FCC81E44543A56**

Amount of Each Disbursement this Period

7900.00

Full Name (Last, First, Middle Initial)

**B. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial repayment of debt - orig bal of \$39,839.38

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 02 / 2015

Transaction ID : **B4BACE7C0A098448BB9B**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. CrossClick Media, Inc.(CCM2)**

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

City Las Vegas State NV Zip Code 89123-3243

Purpose of Disbursement  
partial repay debt for marketing and sales efforts

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2015

Transaction ID : **B04C697BEAD4944A29C7**

Amount of Each Disbursement this Period

100.00

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

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

8500.00

**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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. CrossClick Media, Inc.(CCM2)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		02		2015

Mailing Address 8725 S. Eastern Ave  
Suite 200-661

**Transaction ID : B00394DFED6324F9CAA9**

City Las Vegas State NV Zip Code 89123-3243

Amount of Each Disbursement this Period

160.00
--------

Purpose of Disbursement  
partial repayment of debt for services

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Judson A Church**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		18		2015

Mailing Address 764 Pines Lake Drive West

**Transaction ID : B26FC03DA1C75402C825**

City Wayne State NJ Zip Code 07470-6106

Amount of Each Disbursement this Period

362.00
--------

Purpose of Disbursement  
partial int payment on loan of \$250

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. (2) Finiks Capital, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		28		2015

Mailing Address 14092

**Transaction ID : B3844BB00F1E148A5859**

City Westminster State CA Zip Code 92683

Amount of Each Disbursement this Period

148.22
--------

Purpose of Disbursement  
Interest on loan of \$43,305.84 closed

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

670.22
--------

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

82966.57
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. Mary E Coons**

Mailing Address 1155 Prospect Ave

City Hartford State CT Zip Code 06105-1128

Purpose of Disbursement  
repay bal of principal on \$200,000 loan - still owe interest

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 29 / 2015

**Transaction ID : B72205EF9DF324192827**

Amount of Each Disbursement this Period

147000.00

Full Name (Last, First, Middle Initial)

**B.**

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

/  /

Amount of Each Disbursement this Period

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

/  /

Amount of Each Disbursement this Period

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

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

147000.00

147000.00



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input checked="" 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)  
**Foundation for a Greater America INC**

Full Name (Last, First, Middle Initial)

**A. (2) Finiks Capital, LLC**

Mailing Address 14092

City Westminster State CA Zip Code 92683

Purpose of Disbursement  
Loan to Finiks to invest in small caps

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

**Transaction ID : B066E8FCC154D4131A18**

Amount of Each Disbursement this Period

77400.00

Full Name (Last, First, Middle Initial)

**B. (2) Finiks Capital, LLC**

Mailing Address 14092

City Westminster State CA Zip Code 92683

Purpose of Disbursement  
Loan to Finiks

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2015

**Transaction ID : BDAFC6DC30FE047BDAC1**

Amount of Each Disbursement this Period

1200.00

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

78600.00

78600.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CF994DA24EF4E48F6A3A**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 14092	
City Westminster State CA ZIP Code 92683	

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (11 / 18 / 2014) Date Due: MM / DD / YYYY (05 / 18 / 2016) Interest Rate: 10.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	100000.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C066E8FCC154D4131A18

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 14092	
City Westminster State CA ZIP Code 92683	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
77400.00	0.00	77400.00

**TERMS**

Date Incurred: M / D / Y 01 / 30 / 2015  
Date Due: M / D / Y 11 / 30 / 2016  
Interest Rate: 10.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	77400.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CDAFC6DC30FE047BDACD**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 14092	
City Westminster State CA ZIP Code 92683	

Original Amount of Loan 1200.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1200.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (01 / 30 / 2015) Date Due: MM / DD / YYYY (11 / 30 / 2016) Interest Rate: 10.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1200.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C33A67EE5CED844F9A6A**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 14092	
City Westminster State CA ZIP Code 92683	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
21100.00	14395.94	6704.06

**TERMS**

Date Incurred: MM / DD / YYYY: 11 / 18 / 2014  
 Date Due: MM / DD / YYYY: 05 / 18 / 2016  
 Interest Rate: 10.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	6704.06
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C0BFE50FCF4F24448B07**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) (2) Finiks Capital, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 14092	
City Westminster State CA ZIP Code 92683	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
43305.84	43305.84	0.00

**TERMS**

Date Incurred: MM / DD / YYYY: 11 / 17 / 2014  
 Date Due: MM / DD / YYYY: 05 / 17 / 2016  
 Interest Rate: 10.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	185304.06

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CD58E7F894DE94D439DA**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan 19000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 19000.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y  /  /

Date Due: M M / D D / Y Y Y Y Y Y  /  /

Interest Rate:  % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="19000.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C9659CAF7BA3643F58E3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13200.00	0.00	13200.00

**TERMS**

Date Incurred: MM / DD / YYYY  /  /  Date Due: MM / DD / YYYY  /  /  Interest Rate:  % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	13200.00
<b>TOTALS</b> This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CB8D43C5F6C264142931**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10600.00	0.00	10600.00

**TERMS**

Date Incurred: MM / DD / YYYY (06 / 03 / 2015) Date Due: MM / DD / YYYY (11 / 30 / 2016) Interest Rate: 10.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10600.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C87D8DA3EDDDE45EBB43

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) 1-MCKEA Holdings, LLC	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address PO Box 3587	
City Tustin State CA ZIP Code 92781-3587	

Original Amount of Loan 400.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 400.00
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**TERMS**

Date Incurred: MM / DD / YYYY (10 / 22 / 2014) Date Due: MM / DD / YYYY (04 / 21 / 2015) Interest Rate: None % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	400.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C0BDD4CBB6E074557B1D

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan <input type="text" value="60.00"/>	Cumulative Payment To Date <input type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input type="text" value="60.00"/>
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**TERMS**

Date Incurred:  /  /  Date Due:  /  /  Interest Rate:  % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="60.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : C5BB7F942997C4773ABD

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan 100.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y 12 / 10 / 2014  
Date Due: M M / D D / Y Y Y Y Y Y 12 / 10 / 2015  
Interest Rate: 10.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 100.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CD5BA6E5FC76D48779D4**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Judson A Church	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 764 Pines Lake Drive West	
City Wayne State NJ ZIP Code 07470-6106	

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
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**TERMS**

Date Incurred MM / DD / YYYY 01 / 27 / 2015	Date Due MM / DD / YYYY 11 / 23 / 2016	Interest Rate 15.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 250000.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CE37E59FC22044BB6836**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan 3700.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3700.00
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**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y 12 / 17 / 2014  
Date Due: M M / D D / Y Y Y Y Y Y 12 / 17 / 2015  
Interest Rate: 10.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 3700.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

**LOANS**

NAME OF COMMITTEE (In Full) <b>Foundation for a Greater America INC</b>	<b>Transaction ID : CF90F359E3C6E488384D</b>
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<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Mary E Coons	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
Mailing Address 1155 Prospect Ave	
City Hartford State CT ZIP Code 06105-1128	

Original Amount of Loan 200000.00	Cumulative Payment To Date 200000.00	Balance Outstanding at Close of This Period 0.00
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<b>TERMS</b>	Date Incurred MM / DD / YYYY 11 / 14 / 2014	Date Due MM / DD / YYYY 11 / 28 / 2014	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 0.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **CF837026A5C944213AA7**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan <input type="text" value="26500.00"/>	Cumulative Payment To Date <input type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input type="text" value="26500.00"/>
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**TERMS**

Date Incurred:  /  /  Date Due:  /  /  Interest Rate:  % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="26500.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



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

**LOANS**

NAME OF COMMITTEE (In Full) **Foundation for a Greater America INC** Transaction ID : **C2483C8ED27404C88925**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) CrossClick Media, Inc.(CCM2)	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City Las Vegas State NV ZIP Code 89123-3243	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5.00	0.00	5.00

**TERMS**

Date Incurred: MM / DD / YYYY (01 / 06 / 2015) Date Due: MM / DD / YYYY (01 / 04 / 2016) Interest Rate: 10.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	5.00
<b>TOTALS</b> This Period (last page in this line only).....▶	323565.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 74 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): Documents Services Company
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="552.00"/>	<b>Transaction ID : DF7191FD703624ED9939</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="552.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InFind.com, Inc.</b>	Nature of Debt (Purpose): Foundation Management Consulting Services
Mailing Address 12021 Wilshire Blvd Suite 634	
City State Zip Code Los Angeles CA 90025-1206	

Outstanding Balance Beginning This Period <input type="text" value="6100.00"/>	<b>Transaction ID : D07AA83A2B1C442CB9FF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6100.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Cowan Law</b>	Nature of Debt (Purpose): legal services
Mailing Address 100 Pine Street Suite 1250	
City State Zip Code San Francisco CA 94111-5235	

Outstanding Balance Beginning This Period <input type="text" value="15550.15"/>	<b>Transaction ID : D0CD3DFBC059C4F46942</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15550.15"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="22202.15"/>
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 75 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InFind.com, Inc.</b>	Nature of Debt (Purpose): Foundation Management Consultant
Mailing Address 12021 Wilshire Blvd Suite 634	
City State Zip Code Los Angeles CA 90025-1206	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>	<b>Transaction ID : D73243F62F80C4F16845</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeff Taylor Graphics</b>	Nature of Debt (Purpose): Logo Design - Voters For Hillary
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period <input type="text" value="800.00"/>	<b>Transaction ID : D1AD9BB288B164F50AAC</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="800.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeff Taylor Graphics</b>	Nature of Debt (Purpose): Graphic Design - Logo for FFAGA
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period <input type="text" value="800.00"/>	<b>Transaction ID : D3471344D898C40EFAD0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="800.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="11600.00"/>
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 76 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Womble Carlyle Sandridge &amp; Rice LLP</b>	Nature of Debt (Purpose): legal services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period 9049.42	<b>Transaction ID : D25460DF3EB12497286A</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9049.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Womble Carlyle Sandridge &amp; Rice LLP</b>	Nature of Debt (Purpose): legal services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period 2888.50	<b>Transaction ID : DA419BD9C7E6541A1B0C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2888.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InFind.com, Inc.</b>	Nature of Debt (Purpose): Foundation Management Consultant
Mailing Address 12021 Wilshire Blvd Suite 634	
City State Zip Code Los Angeles CA 90025-1206	

Outstanding Balance Beginning This Period 10000.00	<b>Transaction ID : DA11BD6963DCC4EB4ADC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	21937.92
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 77 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1055.00"/>	<b>Transaction ID : D37A80DF93FD24A89A95</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1055.00"/>	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>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): Documents Services Company - late charge (interest)
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="33.84"/>	<b>Transaction ID : DB1B9E54AFE454C2D967</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="33.84"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Credit Card Processing Fees
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="75.46"/>	<b>Transaction ID : D21F0A10BB40B497D9E3</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="75.46"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="109.30"/>
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 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeff Taylor Graphics</b>	Nature of Debt (Purpose): Graphic Design - VFH Letterhead & word doc
Mailing Address 2633 Lincoln Blvd. Suite 837	
City State Zip Code Santa Monica CA 90405-4619	

Outstanding Balance Beginning This Period 475.00	<b>Transaction ID : DEB91E31A3D3F489CAB6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 475.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Womble Carlyle Sandridge &amp; Rice LLP</b>	Nature of Debt (Purpose): Legal Services
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period 327.00	<b>Transaction ID : DF1CA96753B3F425C80C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 327.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Anastasia Ault</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period 12.71	<b>Transaction ID : D8D6CE9A7F5454A24BC0</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.71

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	814.71
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 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : D052A72C79AB14D00B08</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1500.00"/>	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>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Office supplies - pen ink cartridges
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="6.47"/>	<b>Transaction ID : D54B07E53C6584FF8B9D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6.47"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): campaign mailing expenses - stamps and misc paper, ink, etc
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="2.58"/>	<b>Transaction ID : DCF5D10D02C884E8D957</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.58"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="9.05"/>
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 80 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Propel Management Group, Inc.</b>	Nature of Debt (Purpose): Consulting Services for Call Center Compliance
Mailing Address 3625 West Mac Arthur Blvd Suite 302	
City State Zip Code Santa Ana CA 92704-6849	

Outstanding Balance Beginning This Period <input type="text" value="726.78"/>	<b>Transaction ID : D00ADF2BA0F3941BB967</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="726.78"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Call Center - Outreach to potential Contributors
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period <input type="text" value="24779.38"/>	<b>Transaction ID : D9F340288E3904A73ABF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="20410.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4369.38"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : DF0F31E3EF9C949FDA8D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="6596.16"/>
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 81 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Anastasia Ault</b>	Nature of Debt (Purpose): Office supplies
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period 28.80	<b>Transaction ID : D18D8EB6C2535471ABD6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): late charge on bal due
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 7.56	<b>Transaction ID : DA2483CFD4CB64896951</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID : DB1F2A24F74634E479CD</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1536.36
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 82 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): late charge on bal due
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 8.28	<b>Transaction ID : D843E97F3F00F4209B3D</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Womble Carlyle Sandridge &amp; Rice LLP</b>	Nature of Debt (Purpose): legal services from FEC Counsel - James Kahl
Mailing Address 1200 Nineteenth St. N.W. Suite 500	
City State Zip Code Washington DC 20036-2421	

Outstanding Balance Beginning This Period 436.00	<b>Transaction ID : D5277CB0A39B4404AB71</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 436.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID : D20BE86A921BD40849B4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1944.28
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 83 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): carrying cost for one month
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="8.28"/>	<b>Transaction ID : D0F1307F3ED95485B940</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8.28"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : DB5E9C4E411154911A67</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): CSC prov doc serv - this is int chgs for Sep 14
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="8.28"/>	<b>Transaction ID : DB264CB018C124D45A43</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8.28"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1516.56"/>
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 84 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Propel Management Group, Inc.</b>	Nature of Debt (Purpose): Propel works as liaison for 1NW Contact
Mailing Address 3625 West Mac Arthur Blvd Suite 302	
City State Zip Code Santa Ana CA 92704-6849	

Outstanding Balance Beginning This Period <input type="text" value="129.55"/>	<b>Transaction ID : D4BCB11895D634D77B7A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="129.55"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Anastasia Ault</b>	Nature of Debt (Purpose): USPS - purch stamps for mailing for Hillary campaign
Mailing Address 8686 Merced Circle Unit 1007 D	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period <input type="text" value="19.60"/>	<b>Transaction ID : D97175D1E94414F3DB43</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): partial payment versus accrued Board approved Consulting Contract for treasury services
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : DA96C8592C1024B0AB6A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1649.15"/>
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 85 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): CSC provided doc services - this is int chg for Oct 14
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="8.28"/>	<b>Transaction ID : DC16094DD05A2451B94C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8.28"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): pro rata share of rent/phn/util & callers
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period <input type="text" value="3630.62"/>	<b>Transaction ID : D75D7D386EFDD4D1397C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3630.62"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Technology & Admin Services re websites, interface w/Aristotle
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period <input type="text" value="11078.21"/>	<b>Transaction ID : D34CA1398AA9D45B2B7F</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="760.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10318.21"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="13957.11"/>
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 86 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>(2) Finiks Capital, LLC</b>	Nature of Debt (Purpose): debt for interest on \$500 loan dtd 8.20.14
Mailing Address 14092	
City State Zip Code Westminster CA 92683	

Outstanding Balance Beginning This Period <input type="text" value="7.67"/>	<b>Transaction ID : DE3AB40B928E9456BBE0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.67"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Aristotle - software & website services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="2750.00"/>	<b>Transaction ID : DEA5BF95CA1124A63873</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2750.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting Services
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>	<b>Transaction ID : DDC3E70A424584BF5AD6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="4257.67"/>
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 87 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Aristotle - merchant bank services
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="0.99"/>	<b>Transaction ID : D423CB907B2794E9F9D4</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.99"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): to purchase lead list for callers for Voters for Hillary
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="20000.00"/>	<b>Transaction ID : D9E8127AFA1F84650938</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): finance charges for \$552 bal still due - Total due \$634.80
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period <input type="text" value="15.84"/>	<b>Transaction ID : D0FAF054499984EBCA51</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.84"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="20016.83"/>
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 88 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 209.50	<b>Transaction ID : DAE385C1E8B65485593B</b>	
Amount Incurred This Period 0.00	Payment This Period 209.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms. Kyleen Cane</b>	Nature of Debt (Purpose): loan fee for July 11 loan of \$10,700
Mailing Address 3273 E Warm Springs Rd	
City State Zip Code Henderson NV 89014	

Outstanding Balance Beginning This Period 450.00	<b>Transaction ID : DB0E3FF632F204E87A12</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 450.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms. Kyleen Cane</b>	Nature of Debt (Purpose): interest on loan & loan fee @ 18% for \$10
Mailing Address 3273 E Warm Springs Rd	
City State Zip Code Henderson NV 89014	

Outstanding Balance Beginning This Period 820.87	<b>Transaction ID : DD1C1401C900E45AA95E</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 820.87

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1270.87
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 89 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DC18E3788EB7C4A14818</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): CCM invoice for callers for Hillary, bookkeeping and admin services, social media, website maintenance
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D7A6797E8B42048128AF</b>	
Amount Incurred This Period 15887.61	Payment This Period 0.00	Outstanding Balance at Close of This Period 15887.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): aristotle merchant processing fee
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D981D32DCE56148FC851</b>	
Amount Incurred This Period 0.99	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.99

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	17388.60
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 90 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D3B2F59FABCD3457EB11</b>	
Amount Incurred This Period 500.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Monthly invoicing for callers, technology & admin help
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DAE45B9AC0DBC46A8BF8</b>	
Amount Incurred This Period 9749.83	Payment This Period 0.00	Outstanding Balance at Close of This Period 9749.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mary E Coons</b>	Nature of Debt (Purpose): 5% interest on \$200,000 loan - prin paid in full, this was interest on the loan
Mailing Address 1155 Prospect Ave	
City State Zip Code Hartford CT 06105-1128	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D4B80C0B78F124AE29E1</b>	
Amount Incurred This Period 1418.67	Payment This Period 1418.67	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9749.83
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 91 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>State of California - Franchise Tax Board</b>	Nature of Debt (Purpose): Penalty levied by Calif for failure to file
Mailing Address PO Box 942857	
City State Zip Code Sacramento CA 94257-0001	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D9A6F89C8FDCC431CAC5</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DDE32E8A49D34420FACC</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DFC2828A3CE5247B9818</b>	
Amount Incurred This Period 500.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1750.00
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 92 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): monthly inv for callers, tech assistance and admin help
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : DA5F8752CBAD549A6A0C</b>	
Amount Incurred This Period <input type="text" value="3884.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3884.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): aristotle mech bnkg fee for 1/1/15 to 1/31/15
Mailing Address 205 Pennsylvania Ave., SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : DADF118379F9045FAA79</b>	
Amount Incurred This Period <input type="text" value="0.99"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.99"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : D922A38A5E339444EA40</b>	
Amount Incurred This Period <input type="text" value="1500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="5385.49"/>
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 93 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CSC - Corporation Service Company</b>	Nature of Debt (Purpose): finance chg for outstanding bal - \$9 see notes
Mailing Address PO Box 13397	
City State Zip Code Philadelphia PA 19101-3397	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DCCDF564A3C394C80A55</b>	
Amount Incurred This Period 9.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D7E3D55A2B0314CE39BA</b>	
Amount Incurred This Period 500.00	Payment This Period 290.50	Outstanding Balance at Close of This Period 209.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Monthly Inv for Tech, Admin and Callers for V4Hillary
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DA666C456C06C45158D1</b>	
Amount Incurred This Period 4352.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4352.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	4570.50
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 94 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): Monthly Compliance Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D32DAB1362F0E4A11AAB</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D0319B0FCC7D74BD8808</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Monthly Inv for Technology, Admin & Callers for Voters for Hillary.com
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D338CA291291F4B76970</b>	
Amount Incurred This Period 8685.30	Payment This Period 0.00	Outstanding Balance at Close of This Period 8685.30

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10685.30
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 95 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): compliance consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D61F5DFDD3C75468899B</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D29CB76760DE34F039B3</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Judson A Church</b>	Nature of Debt (Purpose): partial interest due on loan of \$250
Mailing Address 764 Pines Lake Drive West	
City State Zip Code Wayne NJ 07470-6106	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DC413BAB6DE7A4C3C9B9</b>	
Amount Incurred This Period 362.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 362.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2362.00
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 96 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): int on \$3700 loan dtd 12/17/14 - paid 5/20/15 - total \$126.75
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DCE53A3483DF040F6B41</b>	
Amount Incurred This Period 126.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 126.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose): Monthly Inv for Technology, Admin & Callers for VoterforHillary.com
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D819BA887567F4B3090D</b>	
Amount Incurred This Period 11543.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11543.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James P Hodgins</b>	Nature of Debt (Purpose): compliance consulting
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DDAB0464C4CFE47C6960</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	13169.75
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 97 OF 97
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Foundation for a Greater America INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Milton C Ault III</b>	Nature of Debt (Purpose): strategic planning consultant
Mailing Address PO Box 3587	
City State Zip Code Tustin CA 92781-3587	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D280517501F7A4A3185C</b>	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CrossClick Media, Inc.(CCM2)</b>	Nature of Debt (Purpose):
Mailing Address 8725 S. Eastern Ave Suite 200-661	
City State Zip Code Las Vegas NV 89123-3243	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : DE8AC2446B54A4964BF7</b>	
Amount Incurred This Period 8518.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 8518.70

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9018.70
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	183498.29
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	323565.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	507063.29