

# 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

Gold and Silver Political Action Committee - Federal

ADDRESS (number and street) 5855 Topanga Canyon Blvd, Ste 410

Check if different than previously reported. (ACC) Woodland Hills CA 91367

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

C C00487892

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2015 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 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 J. Richard Eichman (382800mm)

Signature of Treasurer J. Richard Eichman (382800mm) *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 01 / 07 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Gold and Silver Political Action Committee - Federal**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="130910.11"/>	<input type="text" value="130910.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="126491.92"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="126491.92"/>	<input type="text" value="131910.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9001.37"/>	<input type="text" value="14419.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="117490.55"/>	<input type="text" value="117490.55"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Gold and Silver Political Action Committee - Federal**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	1000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	1000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	0.00	1000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	1000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6501.37	11919.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6501.37	11919.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	2500.00	2500.00
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)) ..	9001.37	14419.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9001.37	14419.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	1000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	1000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6501.37	11919.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6501.37	11919.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2015

**Transaction ID : EXPB360**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : EXPB364**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : EXPB367**

Amount of Each Disbursement this Period

250.00

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

750.00

**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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : EXPB372

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2015

Transaction ID : EXPB374

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Scott Barman**

Mailing Address P.O. Box 10123

City Gaithersburg State MD Zip Code 20898

Purpose of Disbursement Consulting

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2015

Transaction ID : EXPB381

Amount of Each Disbursement this Period

250.00

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

750.00

**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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB361**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB362**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB366**

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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB365**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB370**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB369**

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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

**Transaction ID : EXPB376**

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

**Transaction ID : EXPB375**

Amount of Each Disbursement this Period

124.00

Full Name (Last, First, Middle Initial)

**C. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

**Transaction ID : EXPB379**

Amount of Each Disbursement this Period

35.00

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

194.00

**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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB378**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB377**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Office Expense

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : EXPB384**

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)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Barry Stuppler and Company, Inc.**

Mailing Address 5855 Topanga Canyon Boulevard  
Suite 410

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement  
Staff Time

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Transaction ID : EXPB383

Amount of Each Disbursement this Period

124.00
--------

Full Name (Last, First, Middle Initial)

**B. Industry Council for Tangible Assets, Inc. (ICTA)**

Mailing Address 623 Harbor Drive

City Annapolis State MD Zip Code 21403

Purpose of Disbursement  
Meeting

001

Candidate Name

Category/  
Type

**Meeting**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2015			

Transaction ID : EXPB382

Amount of Each Disbursement this Period

928.76
--------

Full Name (Last, First, Middle Initial)

**C. Intercorp, Inc.**

Mailing Address 1438-F West Main Street

City St. Ephrata State PA Zip Code 17522

Purpose of Disbursement  
Liability Insurance

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2015			

Transaction ID : EXPB373

Amount of Each Disbursement this Period

2261.01
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3313.77
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. J. Richard Eichman, CPA**

Mailing Address 1127-11th Street  
Suite 300

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

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  
07 / 24 / 2015

**Transaction ID : EXPB363**

Amount of Each Disbursement this Period

250.08

Full Name (Last, First, Middle Initial)

**B. J. Richard Eichman, CPA**

Mailing Address 1127-11th Street  
Suite 300

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

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  
09 / 21 / 2015

**Transaction ID : EXPB368**

Amount of Each Disbursement this Period

224.15

Full Name (Last, First, Middle Initial)

**C. J. Richard Eichman, CPA**

Mailing Address 1127-11th Street  
Suite 300

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

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  
11 / 13 / 2015

**Transaction ID : EXPB380**

Amount of Each Disbursement this Period

163.37

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

637.60

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

6501.37

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Gold and Silver Political Action Committee - Federal**

Full Name (Last, First, Middle Initial)

**A. Stanley Committee, Dee**

Mailing Address P.O. Box 53343

City Lafayette State LA Zip Code 70505

Purpose of Disbursement  
Louisiana - Lafayette City Parish President

Candidate Name

**Dee Stanley**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2015

**Transaction ID : EXPB371**

Amount of Each Disbursement this Period

2500.00

012

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

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

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

2500.00

2500.00