

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CNL Financial Group Inc Political Action Committee

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="58858.77"/>	<input type="text" value="58858.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="78936.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="776.04"/>	<input type="text" value="20853.94"/>
(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="79712.71"/>	<input type="text" value="79712.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="79712.71"/>	<input type="text" value="79712.71"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CNL Financial Group Inc Political Action Committee

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).....	593.84	17922.98
(ii) Unitemized	182.20	2930.96
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	776.04	20853.94
(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)	776.04	20853.94
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))..... ▶	776.04	20853.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	776.04	20853.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
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.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	776.04	20853.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	776.04	20853.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 10
	(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

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)
CNL Financial Group Inc Political Action Committee

A. Holly Greer
Full Name (Last, First, Middle Initial)

Mailing Address 4062 Shorecrest Drive

City Orlando State FL Zip Code 32804

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

Name of Employer CNL Financial Group Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : SA11AI.6288

Amount of Each Receipt this Period
38.46

B. Holly Greer
Full Name (Last, First, Middle Initial)

Mailing Address 4062 Shorecrest Drive

City Orlando State FL Zip Code 32804

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

Name of Employer CNL Financial Group Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : SA11AI.6299

Amount of Each Receipt this Period
38.46

C. Sherry Magee
Full Name (Last, First, Middle Initial)

Mailing Address 8110 Caraway Drive

City Orlando State FL Zip Code 32819

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

Name of Employer CNL Financial Group Occupation VP of Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : SA11AI.6286

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional)..... ▶ **115.38**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Sherry Magee
Full Name (Last, First, Middle Initial)
Mailing Address 8110 Caraway Drive
City Orlando State FL Zip Code 32819
FEC ID number of contributing federal political committee. **C**
Name of Employer CNL Financial Group Occupation VP of Communications
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **769.20**

Date of Receipt **09 / 29 / 2015**
Transaction ID : SA11AI.6297
Amount of Each Receipt this Period **38.46**

B. Stephen Mauldin
Full Name (Last, First, Middle Initial)
Mailing Address 4119 Wardell Place
City Orlando State FL Zip Code 32814
FEC ID number of contributing federal political committee. **C**
Name of Employer CNL Financial Group Occupation Group President - Fund Management
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **730.74**

Date of Receipt **09 / 15 / 2015**
Transaction ID : SA11AI.6282
Amount of Each Receipt this Period **38.46**

C. Stephen Mauldin
Full Name (Last, First, Middle Initial)
Mailing Address 4119 Wardell Place
City Orlando State FL Zip Code 32814
FEC ID number of contributing federal political committee. **C**
Name of Employer CNL Financial Group Occupation Group President - Fund Management
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **769.20**

Date of Receipt **09 / 29 / 2015**
Transaction ID : SA11AI.6293
Amount of Each Receipt this Period **38.46**

SUBTOTAL of Receipts This Page (optional)..... **115.38**
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 8 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Lisa A Schultz
Full Name (Last, First, Middle Initial)
Mailing Address 45 Interlaken Road

City Orlando	State FL	Zip Code 32804
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **792.34**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SA11AI.6283

Amount of Each Receipt this Period

46.16

B. Lisa A Schultz
Full Name (Last, First, Middle Initial)
Mailing Address 45 Interlaken Road

City Orlando	State FL	Zip Code 32804
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **838.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : SA11AI.6294

Amount of Each Receipt this Period

46.16

C. Jeffrey R Shafer
Full Name (Last, First, Middle Initial)
Mailing Address 2241 Lafayette Ave

City Winter Park	State FL	Zip Code 32789
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group	Occupation President of CNL Capital Markets
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SA11AI.6280

Amount of Each Receipt this Period

76.92

SUBTOTAL of Receipts This Page (optional).....▶	169.24
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 9 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

A. Jeffrey R Shafer
Full Name (Last, First, Middle Initial)

Mailing Address 2241 Lafayette Ave

City Winter Park State FL Zip Code 32789

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

Name of Employer CNL Financial Group Occupation President of CNL Capital Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **692.28**

Date of Receipt **09 / 29 / 2015**

Transaction ID : SA11AI.6291

Amount of Each Receipt this Period **76.92**

B. Michael Tetrick
Full Name (Last, First, Middle Initial)

Mailing Address 1223 Lake Highland Drive

City Orlando State FL Zip Code 32803

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

Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **730.74**

Date of Receipt **09 / 15 / 2015**

Transaction ID : SA11AI.6281

Amount of Each Receipt this Period **38.46**

C. Michael Tetrick
Full Name (Last, First, Middle Initial)

Mailing Address 1223 Lake Highland Drive

City Orlando State FL Zip Code 32803

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

Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt **09 / 29 / 2015**

Transaction ID : SA11AI.6292

Amount of Each Receipt this Period **38.46**

SUBTOTAL of Receipts This Page (optional)..... **153.84**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNL Financial Group Inc Political Action Committee

Full Name (Last, First, Middle Initial)
A. Melissa Wall

Mailing Address 6140 Golden Dewdrop Trail

City Windermere State FL Zip Code 34786

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

Name of Employer CNL Financial Group Occupation SVP, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11AI.6289

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Melissa Wall

Mailing Address 6140 Golden Dewdrop Trail

City Windermere State FL Zip Code 34786

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

Name of Employer CNL Financial Group Occupation SVP, Marketing

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
09 / 29 / 2015

Transaction ID : SA11AI.6300

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	593.84