

FEC FORM 3X	REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee	<small>Office Use Only</small>
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1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

ADDRESS (number and street) PO Box 26141

Check if different than previously reported. (ACC) Alexandria VA 22313

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

C C00573154 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

<input type="checkbox"/> April 15 Quarterly Report (Q1)	<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> July 15 Quarterly Report (Q2)	<input checked="" type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> October 15 Quarterly Report (Q3)	<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> 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 02 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 02 / 29 / 2016

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 Christopher M. Marston

Signature of Treasurer Christopher M. Marston [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 03 / 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)

Page 2

Write or Type Committee Name

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="4771503.99"/>	<input type="text" value="4771503.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2567217.44"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35738.92"/>	<input type="text" value="1223655.22"/>
(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="2602956.36"/>	<input type="text" value="5995159.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1222576.01"/>	<input type="text" value="4614778.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1380380.35"/>	<input type="text" value="1380380.35"/>
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24375.00	1189875.00
(ii) Unitemized	9646.61	26521.72
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	34021.61	1216396.72
(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)	34021.61	1216396.72
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).....	1717.31	7258.50
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))..... ▶	35738.92	1223655.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35738.92	1223655.22

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	1177397.90	2496792.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1177397.90	2496792.98
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)	45178.11	2117985.88
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)) ..	1222576.01	4614778.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1222576.01	4614778.86

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)	34021.61	1216396.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34021.61	1216396.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1177397.90	2496792.98
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1717.31	7258.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1175680.59	2489534.48

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This amendment is in response to the amendment of the 2015 year end report amendment. In addition we are providing a response to the Commissions request for additional information letter dated April 11, 2016. The letter requested information on two items. The first item noted that a few disbursements did not have enough information regarding the statement or description of why the disbursement was made. We have reviewed the disbursements and realized that the wrong information had been included. We have fixed those and provided the correct information on this amendment. The second item requests additional information regarding the items on Schedule E, line 24. The Committee notes that the expenditure that was attributed to Iowa, should have been attributed to New Hampshire. We have made the change in this amendment and will send an amendment to the relevant 24 hour report. The Committee also notes that all of the disbursements that would constitute independent expenditures have been disclosed on a Schedule E supporting Line 24. In addition, an in-kind donation of \$1875 was inadvertently left off of the original report and is included in this report.

Form/Schedule:
Transaction ID:

**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 336
	<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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

A. PROF. WILLIAM O. FISHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6250 CHABOT RD
 City OAKLAND State CA Zip Code 94618-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIVERSITY OF RICHMOND SCHOOL OF LA Occupation TEACHER/WRITER/ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt 02 / 12 / 2016
Transaction ID : SA11.138864
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. TERESA GEOFFREY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 SHEARWATER PLACE
 City THE WOODLANDS State TX Zip Code 77381-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation HOME MAKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 02 / 10 / 2016
Transaction ID : SA11.139292
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SUZANNE MALTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 GARTH RD #5D
 City SCARSDALE State NY Zip Code 10583-3882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 05 / 2016
Transaction ID : SA11.139212
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 336
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

A. THOMAS F. MCGARRITY
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 STANWICH RD
 City GREENWICH State CT Zip Code 06830-3548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 08 / 2016
Transaction ID : SA11.138847
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. MR. A JERROLD PERENCHIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1999 AVENUE OF THE STARS STE 3050
 City LOS ANGELES State CA Zip Code 90067-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHARTWELLPARTNERS LLC Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720625.00

Date of Receipt 02 / 07 / 2016
Transaction ID : SA11.139602
 Amount of Each Receipt this Period 1875.00
 Memo Item
 CONTRIBUTION
 FUNDRAISING SERVICES

C. MICHAEL SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 1030 SWINKS MILL RD
 City MCLEAN State VA Zip Code 22102-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation MAINFRAME SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 01 / 2016
Transaction ID : SA11.139288
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3875.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 336
 (check only one)

<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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)
A. WOODBRIDGE LUXURY HOMES OF CALIFORNIA, INC.

Mailing Address 14225 VENTURA BLVD
 STE 100

City State Zip Code
 SHERMAN OAKS CA 91423-2758

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 20000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11.138803

Amount of Each Receipt this Period
 10000.00

Memo Item
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	24375.00

**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 10 OF 336
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

A. COMCAST
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1577

City NEWARK	State NJ	Zip Code 07101
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	444.80
--------------------------	--------

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	10	/	2016

Transaction ID : SA15.6282

Amount of Each Receipt this Period

122.90

 Memo Item
VOID 11/10/15 CHECK PAYMENT

B. COMCAST
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1577

City NEWARK	State NJ	Zip Code 07101
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	444.80
--------------------------	--------

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	10	/	2016

Transaction ID : SA15.6283

Amount of Each Receipt this Period

321.90

 Memo Item
VOID 11/10/15 CHECK PAYMENT

C. SURGE
Full Name (Last, First, Middle Initial)
Mailing Address 920 CANDIA RD

City MANCHESTER	State NH	Zip Code 03109
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼	1169.04
--------------------------	---------

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : SA15.6286

Amount of Each Receipt this Period

1169.04

 Memo Item
REFUND OF OVERPAYMENT

SUBTOTAL of Receipts This Page (optional).....▶	1613.84
TOTAL This Period (last page this line number only).....▶	1613.84

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. IGNACIO L ALVAREZ

Mailing Address 7500 CRYSTAL ISLE WAY

City LAS VEGAS State NV Zip Code 89128

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5346

Amount of Each Disbursement this Period

132.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LISA MARIE BAILEY

Mailing Address 5355 EDMOND ST #1041

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5421

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

C. LISA MARIE BAILEY

Mailing Address 5355 EDMOND ST #1041

City LAS VEGAS State NV Zip Code 89118

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5422

Amount of Each Disbursement this Period

2326.93

Memo Item

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

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

3843.55

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KYLE D BEESLEY

Mailing Address 4321 71ST STREET APT #1

City GREENFIELD State WI Zip Code 53220

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5408

Amount of Each Disbursement this Period

384.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KYLE D BEESLEY

Mailing Address 4321 71ST STREET APT #1

City GREENFIELD State WI Zip Code 53220

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5409

Amount of Each Disbursement this Period

411.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STEVEN C BERRY

Mailing Address 1818 PATRICIA ACRES

City WINTERSET State IA Zip Code 50273

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5567

Amount of Each Disbursement this Period

1269.24

Memo Item

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

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

2064.24

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STEVEN C BERRY

Mailing Address 1818 PATRICIA ACRES

City WINTERSET State IA Zip Code 50273

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5568

Amount of Each Disbursement this Period

2153.86

Memo Item

Full Name (Last, First, Middle Initial)

B. TED M. BESCHTA II

Mailing Address 411 S 94TH PLACE

City MILWAUKEE State WI Zip Code 53214

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5586

Amount of Each Disbursement this Period

384.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TED M. BESCHTA II

Mailing Address 411 S 94TH PLACE

City MILWAUKEE State WI Zip Code 53214

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5587

Amount of Each Disbursement this Period

411.00

Memo Item

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

2948.86

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SAMANTHA M BOGDAHN

Mailing Address 12 JEWEL CT

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5522

Amount of Each Disbursement this Period

32.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RYAN A BRACKETT

Mailing Address 12510 KAIBAB CT

City COLORADO SPRINGS State CO Zip Code 80908

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5519

Amount of Each Disbursement this Period

771.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SHANE M. BREWER

Mailing Address 4013 50TH ST

City MERIDIAN State MS Zip Code 39305

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5546

Amount of Each Disbursement this Period

441.00

Memo Item

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

1244.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHANE M. BREWER

Mailing Address 4013 50TH ST

City MERIDIAN State MS Zip Code 39305

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5547

Amount of Each Disbursement this Period

513.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ALEXANDER B BROWNING

Mailing Address 5280 BUCK HOLLOW DR.

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5190

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. ALEXANDER B BROWNING

Mailing Address 5280 BUCK HOLLOW DR.

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5191

Amount of Each Disbursement this Period

2673.09

Memo Item

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

4801.48

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MICHAEL O BURGESS

Mailing Address 12500 HOMESTEAD DR.

City NOKESVILLE State VA Zip Code 20181

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5455

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. MICHAEL O BURGESS

Mailing Address 12500 HOMESTEAD DR.

City NOKESVILLE State VA Zip Code 20181

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5456

Amount of Each Disbursement this Period

2673.09

Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERT K BURGESS

Mailing Address 124 W CHESTNUT ST UNIT 12

City JEFFERSONVILLE State IN Zip Code 47130

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5515

Amount of Each Disbursement this Period

3000.00

Memo Item

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

7288.48

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ROBERT K BURGESS

Mailing Address 124 W CHESTNUT ST UNIT 12

City State Zip Code
JEFFERSONVILLE IN 47130

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I5516**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN J BUTLER IV

Mailing Address 13 SILVESTRI CIRCLE, APT 23

City State Zip Code
DERRY NH 03038

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I5371**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN J BUTLER IV

Mailing Address 13 SILVESTRI CIRCLE, APT 23

City State Zip Code
DERRY NH 03038

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I5372**

Amount of Each Disbursement this Period

Memo Item

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JOSHUA M CAPRARO

Mailing Address 100 SAINT ANSELM DR, P.O. BOX 0278

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5383

Amount of Each Disbursement this Period

240.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MITCHELL E CARNEY

Mailing Address 6622 BOULEVARD VIEW

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.I5466

Amount of Each Disbursement this Period

939.44

Memo Item

Full Name (Last, First, Middle Initial)

C. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5716

Amount of Each Disbursement this Period

9.32

Memo Item

CARNEY 2/2

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

1179.44

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5717

Amount of Each Disbursement this Period

29.21

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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 / 2016

Transaction ID : SB21B.I5869

Amount of Each Disbursement this Period

6.13

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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 / 2016

Transaction ID : SB21B.I5870

Amount of Each Disbursement this Period

7.82

Memo Item
CARNEY 2/2

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I5871

Amount of Each Disbursement this Period

4	.	6	9
---	---	---	---

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I5872

Amount of Each Disbursement this Period

9	.	2	2
---	---	---	---

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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
0	1			2	1			2	0	1	6		

Transaction ID : SB21B.I5873

Amount of Each Disbursement this Period

2	9	.	3	2
---	---	---	---	---

Memo Item
CARNEY 2/2

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

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

0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I5874

Amount of Each Disbursement this Period

5	.	9	0
---	---	---	---

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I5875

Amount of Each Disbursement this Period

2	3	.	9	9
---	---	---	---	---

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I5876

Amount of Each Disbursement this Period

6	.	3	6
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Memo Item
CARNEY 2/2

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. OFFICEMAX

Mailing Address 263 SHUMAN BLVD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : SB21B.I5971

Amount of Each Disbursement this Period

63.00

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

B. OFFICEMAX

Mailing Address 263 SHUMAN BLVD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : SB21B.I5972

Amount of Each Disbursement this Period

211.93

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I6108

Amount of Each Disbursement this Period

109.22

Memo Item
CARNEY 2/2

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I6109

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	0	0
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Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I6110

Amount of Each Disbursement this Period

1	6	2	.	4	8
---	---	---	---	---	---

Memo Item
CARNEY 2/2

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

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
0	1			2	2			2	0	1	6		

Transaction ID : SB21B.I6111

Amount of Each Disbursement this Period

8	4	.	8	8
---	---	---	---	---

Memo Item
CARNEY 2/2

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

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

0	0	0
---	---	---

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MITCHELL E CARNEY

Mailing Address 6622 BOULEVARD VIEW

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5467

Amount of Each Disbursement this Period

299.36

Memo Item

Full Name (Last, First, Middle Initial)

B. G6 HOSPITALITY

Mailing Address 4001 INTERNATIONAL PKWY

City CARROLLTON State TX Zip Code 75007

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5807

Amount of Each Disbursement this Period

201.56

Memo Item
CARNEY 2/3

Full Name (Last, First, Middle Initial)

C. HY-VEE

Mailing Address 5820 WESTOWN PKWY

City DES MOINES State IA Zip Code 50266

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I5839

Amount of Each Disbursement this Period

12.97

Memo Item
CARNEY 2/3

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

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

299.36

**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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5877

Amount of Each Disbursement this Period

8.46

Memo Item
CARNEY 2/3

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5878

Amount of Each Disbursement this Period

8.49

Memo Item
CARNEY 2/3

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5879

Amount of Each Disbursement this Period

30.54

Memo Item
CARNEY 2/3

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5880

Amount of Each Disbursement this Period

5.38

Memo Item
CARNEY 2/3

Full Name (Last, First, Middle Initial)

B. OFFICEMAX

Mailing Address 263 SHUMAN BLVD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I5973

Amount of Each Disbursement this Period

31.96

Memo Item
CARNEY 2/3

Full Name (Last, First, Middle Initial)

C. MITCHELL E CARNEY

Mailing Address 6622 BOULEVARD VIEW

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5468

Amount of Each Disbursement this Period

288.56

Memo Item

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

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

288.56

**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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CAESARIOS

Mailing Address 1057 ELM ST

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5694

Amount of Each Disbursement this Period

227.32

Memo Item
CARNEY 2/10

Full Name (Last, First, Middle Initial)

B. MITCHELL E CARNEY

Mailing Address 6622 BOULEVARD VIEW

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5469

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELL E CARNEY

Mailing Address 6622 BOULEVARD VIEW

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5470

Amount of Each Disbursement this Period

2673.09

Memo Item

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

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

4288.48

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DEIRDRE M CARSON

Mailing Address 19 TOKANEL DR.

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5309

Amount of Each Disbursement this Period

1269.24

Memo Item

Full Name (Last, First, Middle Initial)

B. DEIRDRE M CARSON

Mailing Address 19 TOKANEL DR.

City LONDONDERRY State NH Zip Code 03053

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5310

Amount of Each Disbursement this Period

2153.86

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT L CHANCE

Mailing Address 1613 PINNACLE LN

City EDMOND State OK Zip Code 73003

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5537

Amount of Each Disbursement this Period

1615.39

Memo Item

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

5038.49

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SCOTT L CHANCE

Mailing Address 1613 PINNACLE LN

City EDMOND State OK Zip Code 73003

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5538

Amount of Each Disbursement this Period

2423.09

Memo Item

Full Name (Last, First, Middle Initial)

B. GENE G CHANDLER

Mailing Address BOX 296

City BARLETT State NH Zip Code 03812

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5334

Amount of Each Disbursement this Period

853.85

Memo Item

Full Name (Last, First, Middle Initial)

C. GENE G CHANDLER

Mailing Address BOX 296

City BARLETT State NH Zip Code 03812

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5335

Amount of Each Disbursement this Period

1780.78

Memo Item

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

5057.72

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. GEORGE B CHAPMAN JR.

Mailing Address 113 SUNSET DR.

City VIDALIA State GA Zip Code 30474

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5336

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. GEORGE B CHAPMAN JR.

Mailing Address 113 SUNSET DR.

City VIDALIA State GA Zip Code 30474

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5337

Amount of Each Disbursement this Period

2673.09

Memo Item

Full Name (Last, First, Middle Initial)

C. SALLY T CHRISTENSEN

Mailing Address 1416 SAPPHIRE SPRINGS CIR

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5520

Amount of Each Disbursement this Period

2076.93

Memo Item

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

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

6365.41

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SALLY T CHRISTENSEN

Mailing Address 1416 SAPPHIRE SPRINGS CIR

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5521

Amount of Each Disbursement this Period

3365.40

Memo Item

Full Name (Last, First, Middle Initial)

B. JON P COLEY

Mailing Address 9615 US HWY 431

City WELLINGTON State AL Zip Code 36279

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5374

Amount of Each Disbursement this Period

3692.31

Memo Item

Full Name (Last, First, Middle Initial)

C. JON P COLEY

Mailing Address 9615 US HWY 431

City WELLINGTON State AL Zip Code 36279

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5375

Amount of Each Disbursement this Period

5788.47

Memo Item

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

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

12846.18

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

Use separate schedule(s)
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BRANDON W COLLINS

Mailing Address 6902 N 52ND W AVE

City TULSA State OK Zip Code 74126

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5241

Amount of Each Disbursement this Period

923.08

Memo Item

Full Name (Last, First, Middle Initial)

B. BRANDON W COLLINS

Mailing Address 6902 N 52ND W AVE

City TULSA State OK Zip Code 74126

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5242

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

C. TRAVIS M. CONDER

Mailing Address 321 CLAY ST APT #4

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5604

Amount of Each Disbursement this Period

288.00

Memo Item

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

2595.70

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KELLY F CONWAY

Mailing Address 2005 MELVILLE ST

City OAKHURST State NJ Zip Code 07755

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5392

Amount of Each Disbursement this Period

294.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KELLY F CONWAY

Mailing Address 2005 MELVILLE ST

City OAKHURST State NJ Zip Code 07755

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5393

Amount of Each Disbursement this Period

102.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KELLY F CONWAY

Mailing Address 2005 MELVILLE ST

City OAKHURST State NJ Zip Code 07755

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2016

Transaction ID : SB21B.I5394

Amount of Each Disbursement this Period

457.50

Memo Item

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

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

853.50

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CANDACE B COOKSEY

Mailing Address 63 N REED AVE

City MOBILE State AL Zip Code 36604

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5250

Amount of Each Disbursement this Period

2307.70

Memo Item

Full Name (Last, First, Middle Initial)

B. CANDACE B COOKSEY

Mailing Address 63 N REED AVE

City MOBILE State AL Zip Code 36604

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5251

Amount of Each Disbursement this Period

3711.55

Memo Item

Full Name (Last, First, Middle Initial)

C. AMANDA M COPELAND

Mailing Address 7 BATTEN ST #2

City WEBSTER State MA Zip Code 01570

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5196

Amount of Each Disbursement this Period

600.00

Memo Item

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

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

6619.25

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMANDA M COPELAND

Mailing Address 7 BATTEN ST #2

City WEBSTER State MA Zip Code 01570

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5197

Amount of Each Disbursement this Period

1100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CARRIE A COXEN

Mailing Address 7505 BUENA VISTA TERRACE

City DERWOOD State MD Zip Code 20855

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5254

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

C. CARRIE A COXEN

Mailing Address 7505 BUENA VISTA TERRACE

City DERWOOD State MD Zip Code 20855

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5255

Amount of Each Disbursement this Period

2326.93

Memo Item

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

4811.55

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SAMUEL M DAVIDSON

Mailing Address 4311 N GEORGIA

City OKLAHOMA CITY State OK Zip Code 73108

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5527

Amount of Each Disbursement this Period

923.08

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUEL M DAVIDSON

Mailing Address 4311 N GEORGIA

City OKLAHOMA CITY State OK Zip Code 73108

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5528

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

C. YVONNE M DEAN-BAILEY

Mailing Address 363 1ST NH TURNPIKE

City NORTHWOOD State NH Zip Code 03261

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5647

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

3807.70

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. YVONNE M DEAN-BAILEY

Mailing Address 363 1ST NH TURNPIKE

City NORTHWOOD State NH Zip Code 03261

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5648

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SARAH J DEANE

Mailing Address 430 COX RD

City GREER State SC Zip Code 29651

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5533

Amount of Each Disbursement this Period

18.75

Memo Item

Full Name (Last, First, Middle Initial)

C. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement
REIMBURSEMENT

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	/	02	/	2016

Transaction ID : SB21B.I5357

Amount of Each Disbursement this Period

199.22

Memo Item

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

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

2717.97

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement
MILEAGE REIMBURSEMENT

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
0	1			2	6			2	0	1	6		

Transaction ID : SB21B.I5851

Amount of Each Disbursement this Period

5	2	.	6	4
---	---	---	---	---

Memo Item
DEJOURNETT 2/2

Full Name (Last, First, Middle Initial)

B. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I5702

Amount of Each Disbursement this Period

1	2	.	3	7
---	---	---	---	---

Memo Item
DEJOURNETT 2/2

Full Name (Last, First, Middle Initial)

C. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
GAS

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
0	1			2	2			2	0	1	6		

Transaction ID : SB21B.I5896

Amount of Each Disbursement this Period

2	8	.	2	3
---	---	---	---	---

Memo Item
DEJOURNETT 2/2

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

0	0	0
---	---	---

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

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2016

Transaction ID : SB21B.I5897

Amount of Each Disbursement this Period

35.22

Memo Item
DEJOURNETT 2/2

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2016

Transaction ID : SB21B.I6087

Amount of Each Disbursement this Period

19.90

Memo Item
DEJOURNETT 2/2

Full Name (Last, First, Middle Initial)

C. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I5358

Amount of Each Disbursement this Period

1584.57

Memo Item

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

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

1584.57

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5703

Amount of Each Disbursement this Period

13.01

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5704

Amount of Each Disbursement this Period

12.84

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5705

Amount of Each Disbursement this Period

22.71

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

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		25		2016

Transaction ID : SB21B.I5706

Amount of Each Disbursement this Period

30.66

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

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		27		2016

Transaction ID : SB21B.I5707

Amount of Each Disbursement this Period

20.85

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

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		30		2016

Transaction ID : SB21B.I5708

Amount of Each Disbursement this Period

34.23

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CLARION HOTEL

Mailing Address 1 CHOICE HOTELS CIRCLE #400

City State Zip Code
ROCKVILLE MD 20850

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5730

Amount of Each Disbursement this Period

364.20

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. COMFORT INN

Mailing Address 1 CHOICE HOTELS CIR #400

City State Zip Code
ROCKVILLE MD 20850

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5734

Amount of Each Disbursement this Period

280.00

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City State Zip Code
WEST DES MOINES IA 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5858

Amount of Each Disbursement this Period

13.14

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

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
02	/	01	/	2016

Transaction ID : SB21B.I5859

Amount of Each Disbursement this Period

21.13

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I5898

Amount of Each Disbursement this Period

36.99

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2016

Transaction ID : SB21B.I5899

Amount of Each Disbursement this Period

45.52

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
GAS

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	/	03	/	2016

Transaction ID : SB21B.I5900

Amount of Each Disbursement this Period

35.74

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. KWIK TRIP

Mailing Address 1626 OAK ST, P.O. BOX 2107

City LA CROSSE State WI Zip Code 54602

Purpose of Disbursement
GAS

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	/	2016

Transaction ID : SB21B.I5901

Amount of Each Disbursement this Period

24.85

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TR

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

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	/	05	/	2016

Transaction ID : SB21B.I5968

Amount of Each Disbursement this Period

42.09

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6047

Amount of Each Disbursement this Period

29.00

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I6088

Amount of Each Disbursement this Period

30.05

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6089

Amount of Each Disbursement this Period

34.36

Memo Item
DEJOURNETT 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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		02		2016

Transaction ID : SB21B.I6090

Amount of Each Disbursement this Period

13.45

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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		09		2016

Transaction ID : SB21B.I6091

Amount of Each Disbursement this Period

392.00

Memo Item
DEJOURNETT 2/10

Full Name (Last, First, Middle Initial)

C. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement
SALARY

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		11		2016

Transaction ID : SB21B.I5359

Amount of Each Disbursement this Period

3576.93

Memo Item

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

3576.93

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5360

Amount of Each Disbursement this Period

1405.75

Memo Item

Full Name (Last, First, Middle Initial)

B. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5709

Amount of Each Disbursement this Period

11.15

Memo Item
DEJOURNETT 2/18

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 6600 NORTH MILITARY TR

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5969

Amount of Each Disbursement this Period

21.44

Memo Item
DEJOURNETT 2/18

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

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

1405.75

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. REGUS

Mailing Address P.O. BOX 842456

City DALLAS State TX Zip Code 75284

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5994

Amount of Each Disbursement this Period

504.29

Memo Item
DEJOURNETT 2/18

Full Name (Last, First, Middle Initial)

B. REGUS

Mailing Address P.O. BOX 842456

City DALLAS State TX Zip Code 75284

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5995

Amount of Each Disbursement this Period

327.47

Memo Item
DEJOURNETT 2/18

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement GAS

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 / 2016

Transaction ID : SB21B.I6009

Amount of Each Disbursement this Period

17.33

Memo Item
DEJOURNETT 2/18

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6048

Amount of Each Disbursement this Period

58.00

Memo Item
DEJOURNETT 2/18

Full Name (Last, First, Middle Initial)

B. TARGET

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6049

Amount of Each Disbursement this Period

58.00

Memo Item
DEJOURNETT 2/18

Full Name (Last, First, Middle Initial)

C. JENNIFER J DEJOURNETT

Mailing Address 18094 GLADSTONE BLVD N

City MAPLE GROVE State MN Zip Code 55311

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5361

Amount of Each Disbursement this Period

5615.40

Memo Item

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

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

5615.40

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KATIE R DELZELL

Mailing Address 1919 14TH ST NW SUITE #514
SUITE #514

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB21B.I5390**

Amount of Each Disbursement this Period

17307.69

Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE R DELZELL

Mailing Address 1919 14TH ST NW SUITE #514
SUITE #514

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : **SB21B.I5391**

Amount of Each Disbursement this Period

3711.54

Memo Item

Full Name (Last, First, Middle Initial)

C. STEPHEN A DEMAURA

Mailing Address 125 CHANCERY RD

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB21B.I5564**

Amount of Each Disbursement this Period

5769.24

Memo Item

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

26788.47

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STEPHEN A DEMAURA

Mailing Address 125 CHANCERY RD

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5565

Amount of Each Disbursement this Period

8653.86

Memo Item

Full Name (Last, First, Middle Initial)

B. JOSEPH M DESILETS

Mailing Address 13009 KINGSWELL DR.

City WOODBRIDGE State VA Zip Code 22193

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5379

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. JOSEPH M DESILETS

Mailing Address 13009 KINGSWELL DR.

City WOODBRIDGE State VA Zip Code 22193

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5380

Amount of Each Disbursement this Period

2673.09

Memo Item

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

12942.34

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KAREN L DETERS

Mailing Address 1902 NW 10TH ST

City ANKENY State IA Zip Code 50023

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5388

Amount of Each Disbursement this Period

791.25

Memo Item

Full Name (Last, First, Middle Initial)

B. JESSICA M DEVIVO

Mailing Address 8144 PECAN VALLEY AVE

City LAS VEGAS State NV Zip Code 89131

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5362

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

C. JESSICA M DEVIVO

Mailing Address 8144 PECAN VALLEY AVE

City LAS VEGAS State NV Zip Code 89131

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5363

Amount of Each Disbursement this Period

2326.93

Memo Item

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

4502.80

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PATRICK B DOUGLAS

Mailing Address 1712 CROSSBOW

City EDMOND State OK Zip Code 73034

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5489

Amount of Each Disbursement this Period

461.54

Memo Item

Full Name (Last, First, Middle Initial)

B. PATRICK B DOUGLAS

Mailing Address 1712 CROSSBOW

City EDMOND State OK Zip Code 73034

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5490

Amount of Each Disbursement this Period

692.31

Memo Item

Full Name (Last, First, Middle Initial)

C. BLAZE A DRINKWINE

Mailing Address 398 3RD AVE S

City ST. CLOUD State MN Zip Code 56301

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5238

Amount of Each Disbursement this Period

444.45

Memo Item

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

1598.30

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BLAZE A DRINKWINE

Mailing Address 398 3RD AVE S

City ST. CLOUD State MN Zip Code 56301

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5239

Amount of Each Disbursement this Period

766.68

Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH C DUNN

Mailing Address 803 NEW YORK

City HOLTON State KS Zip Code 66436

Purpose of Disbursement SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5320

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH C DUNN

Mailing Address 803 NEW YORK

City HOLTON State KS Zip Code 66436

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5321

Amount of Each Disbursement this Period

1980.78

Memo Item

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

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

3901.31

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

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MARY K EARNHARDT

Mailing Address 645 65TH PLACE UNIT #185
STE 185

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5433

Amount of Each Disbursement this Period

3692.31

Memo Item

Full Name (Last, First, Middle Initial)

B. MARY K EARNHARDT

Mailing Address 645 65TH PLACE UNIT #185
STE 185

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5434

Amount of Each Disbursement this Period

15538.47

Memo Item

Full Name (Last, First, Middle Initial)

C. DAKOTA F. EHLENBERG

Mailing Address 9912 BRIDGWATER POINTE

City VILLA RICA State GA Zip Code 30180

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5293

Amount of Each Disbursement this Period

441.00

Memo Item

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

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

19671.78

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DAKOTA F. EHLENBERG

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		15		2016

Mailing Address 9912 BRIDGWATER POINTE

City VILLA RICA State GA Zip Code 30180

Transaction ID : SB21B.I5294

Purpose of Disbursement SALARY

Amount of Each Disbursement this Period

513.00

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. EVAN J. EITEL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

Mailing Address 919 MOUNTAIN VIEW RD

City ASBURY State NJ Zip Code 08802

Transaction ID : SB21B.I5327

Purpose of Disbursement SALARY

Amount of Each Disbursement this Period

210.00

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. TRAVIS J EKBOM

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2016

Mailing Address 1552 COMO AVE APT #3

City ST PAUL State MN Zip Code 55108

Transaction ID : SB21B.I5603

Purpose of Disbursement SALARY

Amount of Each Disbursement this Period

276.92

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

999.92

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EMELIE A. ENGLEHART

Mailing Address 13518 LAKESIDE TERRACE DR.

City HOUSTON State TX Zip Code 07044

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5322

Amount of Each Disbursement this Period

195.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EMELIE A. ENGLEHART

Mailing Address 13518 LAKESIDE TERRACE DR.

City HOUSTON State TX Zip Code 07044

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5323

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERTO A. ESTRELLA

Mailing Address 2504 COLLEGE ST

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5517

Amount of Each Disbursement this Period

238.25

Memo Item

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

493.25

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ROBERTO A. ESTRELLA

Mailing Address 2504 COLLEGE ST

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement SALARY

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	/	17	/	2016

Transaction ID : SB21B.I5518

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KEVIN D FAIRBROTHER

Mailing Address 17 REV. HOUSTON DR.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5402

Amount of Each Disbursement this Period

1269.24

Memo Item

Full Name (Last, First, Middle Initial)

C. KEVIN D FAIRBROTHER

Mailing Address 17 REV. HOUSTON DR.

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5403

Amount of Each Disbursement this Period

2153.86

Memo Item

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

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

3523.10

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

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<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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. YANCE A FALKNER

Mailing Address 2356 HWY 389

City WOODLAND State MS Zip Code 39776

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5645

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. YANCE A FALKNER

Mailing Address 2356 HWY 389

City WOODLAND State MS Zip Code 39776

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5646

Amount of Each Disbursement this Period

2673.09

Memo Item

Full Name (Last, First, Middle Initial)

C. STEPHEN J FISENNE

Mailing Address 10932 CHAMBERLAIN HALL CT

City CHARLOTTE State NC Zip Code 28277

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5566

Amount of Each Disbursement this Period

75.00

Memo Item

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

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

4363.48

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHRISTINA M. FITCH

Mailing Address 116 HIAWATHA TRAIL

City LIVERPOOL State NY Zip Code 13088

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5268

Amount of Each Disbursement this Period

198.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTINA M. FITCH

Mailing Address 116 HIAWATHA TRAIL

City LIVERPOOL State NY Zip Code 13088

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5269

Amount of Each Disbursement this Period

82.50

Memo Item

Full Name (Last, First, Middle Initial)

C. SHANNON G FITCH

Mailing Address 116 HIAWATHA TRAIL

City LIVERPOOL State NY Zip Code 13088

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5548

Amount of Each Disbursement this Period

12.00

Memo Item

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

292.50

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ABIGAIL R FLANDERS

Mailing Address 1438 STORY DR.

City KNOXVILLE State IA Zip Code 50138

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5185

Amount of Each Disbursement this Period

1061.54

Memo Item

Full Name (Last, First, Middle Initial)

B. ABIGAIL R FLANDERS

Mailing Address 1438 STORY DR.

City KNOXVILLE State IA Zip Code 50138

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5186

Amount of Each Disbursement this Period

1842.31

Memo Item

Full Name (Last, First, Middle Initial)

C. SEAN M FOLEY

Mailing Address 39 INTERSTATE RD

City KENNEBUNK State ME Zip Code 04043

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5541

Amount of Each Disbursement this Period

270.00

Memo Item

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

3173.85

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KAITLIN O FORAN

Mailing Address 229 TRILLIUM AVE

City SUMMERVILLE State SC Zip Code 29483

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5386

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

B. KAITLIN O FORAN

Mailing Address 229 TRILLIUM AVE

City SUMMERVILLE State SC Zip Code 29483

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5387

Amount of Each Disbursement this Period

2326.93

Memo Item

Full Name (Last, First, Middle Initial)

C. MARY D. FRANSON

Mailing Address 2740 LE HOMME DIEU HTS NE

City ALEXANDRIA State MN Zip Code 56308

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5431

Amount of Each Disbursement this Period

500.00

Memo Item

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

4211.55

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MARY D. FRANSON

Mailing Address 2740 LE HOMME DIEU HTS NE

City ALEXANDRIA State MN Zip Code 56308

Purpose of Disbursement
SALARY

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		26		2016

Transaction ID : SB21B.I5432

Amount of Each Disbursement this Period

850.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAM S GARDNER

Mailing Address 26 BIENDA LANE

City ROCHESTER State NH Zip Code 03867

Purpose of Disbursement
SALARY

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		11		2016

Transaction ID : SB21B.I5641

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM S GARDNER

Mailing Address 26 BIENDA LANE

City ROCHESTER State NH Zip Code 03867

Purpose of Disbursement
SALARY

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		15		2016

Transaction ID : SB21B.I5642

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

1225.00

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JOSEPH E GARVEY

Mailing Address 255 WOODLAND ST

City WEST BOYLSTON State MA Zip Code 01583

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5378

Amount of Each Disbursement this Period

115.38

Memo Item

Full Name (Last, First, Middle Initial)

B. DEVIN R. GATTON

Mailing Address 2157 69TH ST

City WEST ALLIS State WI Zip Code 53219

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5313

Amount of Each Disbursement this Period

384.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DEVIN R. GATTON

Mailing Address 2157 69TH ST

City WEST ALLIS State WI Zip Code 53219

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5314

Amount of Each Disbursement this Period

411.00

Memo Item

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

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

910.38

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ZACHARY S. GELPEY

Mailing Address 40 B RIVEL ST

City DANVERS State MA Zip Code 01923

Purpose of Disbursement
SALARY

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	/	12	/	2016

Transaction ID : SB21B.I5649

Amount of Each Disbursement this Period

375.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DARIAN M GIST

Mailing Address 65 CLINTON ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5299

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

C. DARIAN M GIST

Mailing Address 65 CLINTON ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5300

Amount of Each Disbursement this Period

1980.78

Memo Item

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

3509.63

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DALTON D GLASSCOCK

Mailing Address 9014 W BRITTON CIR

City WICHITA State KS Zip Code 67205

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5295

Amount of Each Disbursement this Period

692.31

Memo Item

Full Name (Last, First, Middle Initial)

B. DALTON D GLASSCOCK

Mailing Address 9014 W BRITTON CIR

City WICHITA State KS Zip Code 67205

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5296

Amount of Each Disbursement this Period

1288.47

Memo Item

Full Name (Last, First, Middle Initial)

C. BETTY A GLEASON

Mailing Address 407 38TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5236

Amount of Each Disbursement this Period

70.00

Memo Item

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

2050.78

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LAUREN J GRAVES

Mailing Address 315 HUNTCLIFF DR.

City TAYLORS State SC Zip Code 29687

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5410

Amount of Each Disbursement this Period

45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LAUREN J GRAVES

Mailing Address 315 HUNTCLIFF DR.

City TAYLORS State SC Zip Code 29687

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5411

Amount of Each Disbursement this Period

45.00

Memo Item

Full Name (Last, First, Middle Initial)

C. REBECCA E GRAY

Mailing Address 5 YORK RD

City HAMPSTEAD State NH Zip Code 03841

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5507

Amount of Each Disbursement this Period

202.50

Memo Item

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

292.50

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ANDREW J GRENIER

Mailing Address 100 SAINT ANSELM DR. BOX 784

City State Zip Code
GOFFSTOWN NH 03102

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5210

Amount of Each Disbursement this Period

547.50

Memo Item

Full Name (Last, First, Middle Initial)

B. AARON D GULBRANSEN

Mailing Address 11803 ASHWOOD CT

City State Zip Code
LOCUST GROVE VA 22508

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5183

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. AARON D GULBRANSEN

Mailing Address 11803 ASHWOOD CT

City State Zip Code
LOCUST GROVE VA 22508

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2016

Transaction ID : SB21B.I5184

Amount of Each Disbursement this Period

2423.09

Memo Item

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

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

4585.98

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DYLAN M GUNNELS

Mailing Address 100 RIVERBEND DR. APT C-28

City WEST COLUMBIA State SC Zip Code 29169

Purpose of Disbursement
SALARY

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
02		11		2016

Transaction ID : SB21B.I5316

Amount of Each Disbursement this Period

22.50

Memo Item

Full Name (Last, First, Middle Initial)

B. DYLAN M GUNNELS

Mailing Address 100 RIVERBEND DR. APT C-28

City WEST COLUMBIA State SC Zip Code 29169

Purpose of Disbursement
SALARY

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
02		11		2016

Transaction ID : SB21B.I5317

Amount of Each Disbursement this Period

670.50

Memo Item

Full Name (Last, First, Middle Initial)

C. DYLAN M GUNNELS

Mailing Address 100 RIVERBEND DR. APT C-28

City WEST COLUMBIA State SC Zip Code 29169

Purpose of Disbursement
SALARY

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
02		15		2016

Transaction ID : SB21B.I5318

Amount of Each Disbursement this Period

285.00

Memo Item

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

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

978.00

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KEVIN M GUSTAFSON

Mailing Address 100 RIVERBEND DR. APT C-28

City WEST COLUMBIA State SC Zip Code 29169

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5404

Amount of Each Disbursement this Period

670.50

Memo Item

Full Name (Last, First, Middle Initial)

B. KEVIN M GUSTAFSON

Mailing Address 100 RIVERBEND DR. APT C-28

City WEST COLUMBIA State SC Zip Code 29169

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5405

Amount of Each Disbursement this Period

285.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ASHLEY D HAHN

Mailing Address 8213 NW 79TH ST

City OKLAHOMA CITY State OK Zip Code 73132

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5221

Amount of Each Disbursement this Period

923.08

Memo Item

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

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

1878.58

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ASHLEY D HAHN

Mailing Address 8213 NW 79TH ST

City OKLAHOMA CITY State OK Zip Code 73132

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5222

Amount of Each Disbursement this Period

3	1	8	4	.	6	2
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. JEFFREY A HALE JR.

Mailing Address 65 CLINTON ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5353

Amount of Each Disbursement this Period

1	1	5	3	.	8	5
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. JEFFREY A HALE JR.

Mailing Address 65 CLINTON ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement SALARY

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	/	12	/	2016

Transaction ID : SB21B.I5354

Amount of Each Disbursement this Period

5	7	6	.	9	3
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Memo Item

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

3	1	1	.	5	4
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TOTAL This Period (last page this line number only)..... ▶

3	1	1	.	5	4
---	---	---	---	---	---

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AUDRA L. HAMPSCH

Mailing Address 22 ROCKRIDGE RD

City HOPEDALE State MA Zip Code 01747

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5225

Amount of Each Disbursement this Period

1497.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AUDRA L. HAMPSCH

Mailing Address 22 ROCKRIDGE RD

City HOPEDALE State MA Zip Code 01747

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5226

Amount of Each Disbursement this Period

210.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JOSEPH A HARLEY

Mailing Address 720 CREEKSIDE DR.

City CHARLESTON State SC Zip Code 29412

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5376

Amount of Each Disbursement this Period

165.00

Memo Item

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

1872.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JOSEPH A HARLEY

Mailing Address 720 CREEKSIDE DR.

City CHARLESTON State SC Zip Code 29412

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5377

Amount of Each Disbursement this Period

45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANDREA C HARLIN

Mailing Address 1491 MCCARTHY RD

City EAGAN State MN Zip Code 55121

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5208

Amount of Each Disbursement this Period

353.85

Memo Item

Full Name (Last, First, Middle Initial)

C. ANDREA C HARLIN

Mailing Address 1491 MCCARTHY RD

City EAGAN State MN Zip Code 55121

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5209

Amount of Each Disbursement this Period

610.78

Memo Item

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

1009.63

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WALTER K HARRIS

Mailing Address 4101 MT ATLAS LN

City HAYMARKET State VA Zip Code 20169

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5637

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. WALTER K HARRIS

Mailing Address 4101 MT ATLAS LN

City HAYMARKET State VA Zip Code 20169

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5638

Amount of Each Disbursement this Period

2673.09

Memo Item

Full Name (Last, First, Middle Initial)

C. KRISTALLE M HERDA

Mailing Address 3325 PLAZA DEL PAZ

City LAS VEGAS State NV Zip Code 89102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5406

Amount of Each Disbursement this Period

1384.62

Memo Item

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

5673.10

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KRISTALLE M HERDA

Mailing Address 3325 PLAZA DEL PAZ

City LAS VEGAS State NV Zip Code 89102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5407

Amount of Each Disbursement this Period

2326.93

Memo Item

Full Name (Last, First, Middle Initial)

B. TIMOTHY K HUGHES

Mailing Address 50 HEATON AVE

City NORWOOD State MA Zip Code 02062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5598

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TIMOTHY K HUGHES

Mailing Address 50 HEATON AVE

City NORWOOD State MA Zip Code 02062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5599

Amount of Each Disbursement this Period

1153.85

Memo Item

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

3730.78

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TIMOTHY K HUGHES

Mailing Address 50 HEATON AVE

City NORWOOD State MA Zip Code 02062

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : **SB21B.I5600**

Amount of Each Disbursement this Period

1980.78

Memo Item

Full Name (Last, First, Middle Initial)

B. CODY C INMAN

Mailing Address 8730 S COLLEGE PL

City TULSA State OK Zip Code 74137

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB21B.I5284**

Amount of Each Disbursement this Period

923.08

Memo Item

Full Name (Last, First, Middle Initial)

C. CODY C INMAN

Mailing Address 8730 S COLLEGE PL

City TULSA State OK Zip Code 74137

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : **SB21B.I5285**

Amount of Each Disbursement this Period

1384.62

Memo Item

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

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

4288.48

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

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

FOR LINE NUMBER:
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<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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. NITSA C IOANNIDES

Mailing Address 5 FOX PARK DR. APT #90

City PLYMOUTH State NH Zip Code 03264

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5479

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

B. NITSA C IOANNIDES

Mailing Address 5 FOX PARK DR. APT #90

City PLYMOUTH State NH Zip Code 03264

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5480

Amount of Each Disbursement this Period

1980.78

Memo Item

Full Name (Last, First, Middle Initial)

C. DAVID L ISBELL

Mailing Address 6447 OAK SAVANNA CT

City LAS VEGAS State NV Zip Code 89141

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5302

Amount of Each Disbursement this Period

692.31

Memo Item

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

3826.94

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DAVID L ISBELL

Mailing Address 6447 OAK SAVANNA CT

City LAS VEGAS State NV Zip Code 89141

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5303

Amount of Each Disbursement this Period

1038.47

Memo Item

Full Name (Last, First, Middle Initial)

B. MINDY L JOHANSON

Mailing Address 4722 W LIBERATION DR.

City HERRIMAN State UT Zip Code 84096

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5458

Amount of Each Disbursement this Period

369.24

Memo Item

Full Name (Last, First, Middle Initial)

C. MINDY L JOHANSON

Mailing Address 4722 W LIBERATION DR.

City HERRIMAN State UT Zip Code 84096

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5459

Amount of Each Disbursement this Period

553.86

Memo Item

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

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

1961.57

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KAITLIN M JONES

Mailing Address 309 S WACCAMAW AVE

City COLUMBIA State SC Zip Code 29205

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5384

Amount of Each Disbursement this Period

129.75

Memo Item

Full Name (Last, First, Middle Initial)

B. KAITLIN M JONES

Mailing Address 309 S WACCAMAW AVE

City COLUMBIA State SC Zip Code 29205

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5385

Amount of Each Disbursement this Period

22.50

Memo Item

Full Name (Last, First, Middle Initial)

C. LORENA A JORDAN

Mailing Address 2140 BIRCH ST

City N CHARLESTON State SC Zip Code 29405

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5424

Amount of Each Disbursement this Period

480.00

Memo Item

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

632.25

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DEVIN A KEEHNER

Mailing Address 55 RENEE DR.

City STONINGTON State CT Zip Code 06379

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5311

Amount of Each Disbursement this Period

1803.42

Memo Item

Full Name (Last, First, Middle Initial)

B. MADISON R KOCHANEK

Mailing Address 188 PAIGE HILL RD

City GOFFSTOWN State NH Zip Code 03045

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5428

Amount of Each Disbursement this Period

67.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ANNA G KUTA

Mailing Address 5472 WILD ROSE LANE #4401

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5214

Amount of Each Disbursement this Period

1153.85

Memo Item

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

3024.77

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ANNA G KUTA

Mailing Address 5472 WILD ROSE LANE #4401

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5215

Amount of Each Disbursement this Period

1980.78

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUEL A LANCASTER

Mailing Address 328 CASCADE DR.

City MARIETTA State GA Zip Code 30064

Purpose of Disbursement SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5523

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUEL A LANCASTER

Mailing Address 328 CASCADE DR.

City MARIETTA State GA Zip Code 30064

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5524

Amount of Each Disbursement this Period

2673.09

Memo Item

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

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

6269.26

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SARAH H LITTERAL

Mailing Address 12269 S STRANG LINE RD #706

City OLATHE State KS Zip Code 66062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5531

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. SARAH H LITTERAL

Mailing Address 12269 S STRANG LINE RD #706

City OLATHE State KS Zip Code 66062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5532

Amount of Each Disbursement this Period

2673.09

Memo Item

Full Name (Last, First, Middle Initial)

C. THOMAS P MADDEN

Mailing Address 2330 GARFIELD AVE

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5595

Amount of Each Disbursement this Period

477.00

Memo Item

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

4765.48

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TIMOTHY J MALONEY

Mailing Address 405 OXFORD ST

City HEFLIN State AL Zip Code 36264

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5596

Amount of Each Disbursement this Period

4615.39

Memo Item

Full Name (Last, First, Middle Initial)

B. TIMOTHY J MALONEY

Mailing Address 405 OXFORD ST

City HEFLIN State AL Zip Code 36264

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5597

Amount of Each Disbursement this Period

9423.09

Memo Item

Full Name (Last, First, Middle Initial)

C. KERRY L MARSH

Mailing Address 65 CLINTON ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5399

Amount of Each Disbursement this Period

4615.38

Memo Item

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

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

18653.86

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KERRY L MARSH

Mailing Address 65 CLINTON ST

City State Zip Code
CONCORD NH 03301

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5400

Amount of Each Disbursement this Period

16923.07

Memo Item

Full Name (Last, First, Middle Initial)

B. KERRY L MARSH

Mailing Address 65 CLINTON ST

City State Zip Code
CONCORD NH 03301

Purpose of Disbursement
REIMBURSEMENT

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	/	26	/	2016

Transaction ID : SB21B.I5401

Amount of Each Disbursement this Period

8435.94

Memo Item

Full Name (Last, First, Middle Initial)

C. CAESARIOS

Mailing Address 1057 ELM ST

City State Zip Code
MANCHESTER NH 03101

Purpose of Disbursement
FOOD/BEVERAGES

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	/	01	/	2016

Transaction ID : SB21B.I5693

Amount of Each Disbursement this Period

86.18

Memo Item

MARSH 2/26

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

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

25359.01

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. COACH STOP

Mailing Address 715 ME-3

City BAR HARBOR State ME Zip Code 04609

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	5			2	0	1	6		

Transaction ID : SB21B.I5732

Amount of Each Disbursement this Period

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

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
0	2			0	2			2	0	1	6		

Transaction ID : SB21B.I5785

Amount of Each Disbursement this Period

2	5	9	.	2	0
---	---	---	---	---	---

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
0	2			0	2			2	0	1	6		

Transaction ID : SB21B.I5786

Amount of Each Disbursement this Period

2	5	9	.	2	0
---	---	---	---	---	---

Memo Item
MARSH 2/26

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

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
02	/	04	/	2016

Transaction ID : SB21B.I5788

Amount of Each Disbursement this Period

24.00

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
SIGN MATERIALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I5832

Amount of Each Disbursement this Period

27.94

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
SIGN MATERIALS

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
02	/	06	/	2016

Transaction ID : SB21B.I5833

Amount of Each Disbursement this Period

158.20

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement
TRAVEL

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	/	26	/	2016

Transaction ID : SB21B.I5902

Amount of Each Disbursement this Period

1757.81

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
SIGN MATERIALS

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	/	28	/	2016

Transaction ID : SB21B.I5927

Amount of Each Disbursement this Period

76.80

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. MARKET BASKET

Mailing Address 875 EAST ST

City TEWKSBURY State MA Zip Code 01876

Purpose of Disbursement
FOOD/BEVERAGES

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	/	24	/	2016

Transaction ID : SB21B.I5944

Amount of Each Disbursement this Period

71.94

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MARKET BASKET

Mailing Address 875 EAST ST

City TEWKSBURY State MA Zip Code 01876

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I5945

Amount of Each Disbursement this Period

61.97

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. MARKET BASKET

Mailing Address 875 EAST ST

City TEWKSBURY State MA Zip Code 01876

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I5946

Amount of Each Disbursement this Period

103.13

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. RITE AID

Mailing Address 30 HUNTER LN

City CAMP HILL State PA Zip Code 17011

Purpose of Disbursement
GIFT CARDS FOR CANVASSERS

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 / 2016

Transaction ID : SB21B.I5998

Amount of Each Disbursement this Period

460.90

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SAMS CLUB

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72712

Purpose of Disbursement
FOOD/BEVERAGES

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
02		03		2016

Transaction ID : SB21B.I6003

Amount of Each Disbursement this Period

156.43

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. SEASON TICKETS SPORTS PUB

Mailing Address 554 FRONT ST

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2016

Transaction ID : SB21B.I6006

Amount of Each Disbursement this Period

152.60

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Transaction ID : SB21B.I6010

Amount of Each Disbursement this Period

19.71

Memo Item
MARSH 2/26

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

0.00

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHELL OIL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2016

Transaction ID : SB21B.I6011

Amount of Each Disbursement this Period

23.52

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6012

Amount of Each Disbursement this Period

19.42

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. SHORTYS MEXICAN ROADHOUSE

Mailing Address 206 NEW HAMPSHIRE 101

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I6013

Amount of Each Disbursement this Period

172.37

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
COPIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6016

Amount of Each Disbursement this Period

22.22

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
COPIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6017

Amount of Each Disbursement this Period

22.22

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I6018

Amount of Each Disbursement this Period

267.18

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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		26		2016

Transaction ID : SB21B.I6092

Amount of Each Disbursement this Period

889.75

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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		2016

Transaction ID : SB21B.I6093

Amount of Each Disbursement this Period

306.90

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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		30		2016

Transaction ID : SB21B.I6094

Amount of Each Disbursement this Period

1155.00

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6095

Amount of Each Disbursement this Period

350.00

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.I6096

Amount of Each Disbursement this Period

722.95

Memo Item
MARSH 2/26

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2016

Transaction ID : SB21B.I6106

Amount of Each Disbursement this Period

14.88

Memo Item
MARSH 2/26

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5491

Amount of Each Disbursement this Period

708.61

Memo Item

Full Name (Last, First, Middle Initial)

B. CUMBERLAND FARMS

Mailing Address 100 CROSSING BLVD

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5744

Amount of Each Disbursement this Period

20.27

Memo Item
MARVIN 2/2

Full Name (Last, First, Middle Initial)

C. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5791

Amount of Each Disbursement this Period

4.83

Memo Item
MARVIN 2/2

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

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

708.61

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5792

Amount of Each Disbursement this Period

16.41

Memo Item
MARVIN 2/2

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I6097

Amount of Each Disbursement this Period

44.74

Memo Item
MARVIN 2/2

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I6098

Amount of Each Disbursement this Period

62.50

Memo Item
MARVIN 2/2

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I6099

Amount of Each Disbursement this Period

3	3	9	2
---	---	---	---

Memo Item
MARVIN 2/2

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I6112

Amount of Each Disbursement this Period

1	1	4	5	7
---	---	---	---	---

Memo Item
MARVIN 2/2

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I6113

Amount of Each Disbursement this Period

1	2	7	1	2
---	---	---	---	---

Memo Item
MARVIN 2/2

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

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

0	0	0
---	---	---

0	0	0	0
---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5492

Amount of Each Disbursement this Period

184.46

Memo Item

Full Name (Last, First, Middle Initial)

B. BEST BUY

Mailing Address 7601 PENN AVE S

City RICHFIELD State MN Zip Code 55423

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5681

Amount of Each Disbursement this Period

100.00

Memo Item
MARVIN 2/3

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement COPIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6019

Amount of Each Disbursement this Period

0.19

Memo Item
MARVIN 2/3

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

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

184.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

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		01		2016

Transaction ID : SB21B.I6020

Amount of Each Disbursement this Period

2.99

Memo Item
MARVIN 2/3

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement FOOD/BEVERAGES

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		01		2016

Transaction ID : SB21B.I6114

Amount of Each Disbursement this Period

40.06

Memo Item
MARVIN 2/3

Full Name (Last, First, Middle Initial)

C. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement REIMBURSEMENT

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		10		2016

Transaction ID : SB21B.I5493

Amount of Each Disbursement this Period

292.68

Memo Item

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

292.68

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CUMBERLAND FARMS

Mailing Address 100 CROSSING BLVD

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5745

Amount of Each Disbursement this Period

21.00

Memo Item
MARVIN 2/10

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5774

Amount of Each Disbursement this Period

14.99

Memo Item
MARVIN 2/10

Full Name (Last, First, Middle Initial)

C. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5793

Amount of Each Disbursement this Period

15.85

Memo Item
MARVIN 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHAW'S

Mailing Address 750 W CENTER ST

City WEST BRIDGEWATER State MA Zip Code 02379

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6007

Amount of Each Disbursement this Period

44.68

Memo Item
MARVIN 2/10

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
COPIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6021

Amount of Each Disbursement this Period

0.54

Memo Item
MARVIN 2/10

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6022

Amount of Each Disbursement this Period

63.47

Memo Item
MARVIN 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR.

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2016

Transaction ID : SB21B.I6023

Amount of Each Disbursement this Period

125.44

Memo Item
MARVIN 2/10

Full Name (Last, First, Middle Initial)

B. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2016

Transaction ID : SB21B.I5494

Amount of Each Disbursement this Period

2307.69

Memo Item

Full Name (Last, First, Middle Initial)

C. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2016

Transaction ID : SB21B.I5495

Amount of Each Disbursement this Period

600.14

Memo Item

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

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

2907.83

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHAW'S

Mailing Address 750 W CENTER ST

City WEST BRIDGEWATER State MA Zip Code 02379

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I6008

Amount of Each Disbursement this Period

131.44

Memo Item
MARVIN 2/18

Full Name (Last, First, Middle Initial)

B. TAVERN AT RIVERS EDGE

Mailing Address 163 WATER ST

City EXETER State NH Zip Code 03833

Purpose of Disbursement FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6054

Amount of Each Disbursement this Period

222.75

Memo Item
MARVIN 2/18

Full Name (Last, First, Middle Initial)

C. PATRICK L MARVIN

Mailing Address 24 ROSEMOND AVE APT #2

City PORTLAND State ME Zip Code 04103

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5496

Amount of Each Disbursement this Period

6211.54

Memo Item

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

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

6211.54

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TAYLOR MASON

Mailing Address 1081 EAGLEWOOD TRL

City CHARLESTON State SC Zip Code 29412

Purpose of Disbursement REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5436

Amount of Each Disbursement this Period

1489.46

Memo Item

Full Name (Last, First, Middle Initial)

B. CLARION HOTEL

Mailing Address 1 CHOICE HOTELS CIRCLE #400

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5731

Amount of Each Disbursement this Period

101.60

Memo Item
MASON 2/10

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5787

Amount of Each Disbursement this Period

145.83

Memo Item
MASON 2/10

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

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

1489.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement
TRAVEL

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	/	01	/	2016

Transaction ID : SB21B.I5796

Amount of Each Disbursement this Period

99.68

Memo Item
MASON 2/10

Full Name (Last, First, Middle Initial)

B. LOWES

Mailing Address 1000 LOWES BLVD

City **MOORESVILLE** State **NC** Zip Code **28117**

Purpose of Disbursement
SIGN POSTS

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	/	07	/	2016

Transaction ID : SB21B.I5929

Amount of Each Disbursement this Period

616.33

Memo Item
MASON 2/10

Full Name (Last, First, Middle Initial)

C. TARGET

Mailing Address 1000 NICOLLET MALL

City **MINNEAPOLIS** State **MN** Zip Code **55403**

Purpose of Disbursement
OFFICE SUPPLIES

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	/	03	/	2016

Transaction ID : SB21B.I6052

Amount of Each Disbursement this Period

182.39

Memo Item
MASON 2/10

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6115

Amount of Each Disbursement this Period

101.88

Memo Item
MASON 2/10

Full Name (Last, First, Middle Initial)

B. TAYLOR MASON

Mailing Address 1081 EAGLEWOOD TRL

City CHARLESTON State SC Zip Code 29412

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5437

Amount of Each Disbursement this Period

1017.20

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5751

Amount of Each Disbursement this Period

25.00

Memo Item
MASON 2/18

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

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

1017.20

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
SIGN POSTS

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
0	2			1	4			2	0	1	6		

Transaction ID : SB21B.I5834

Amount of Each Disbursement this Period

1	6	2	.	7	9
---	---	---	---	---	---

Memo Item
MASON 2/18

Full Name (Last, First, Middle Initial)

B. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
SIGN POSTS

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
0	2			1	4			2	0	1	6		

Transaction ID : SB21B.I5930

Amount of Each Disbursement this Period

1	1	4	.	1	4
---	---	---	---	---	---

Memo Item
MASON 2/18

Full Name (Last, First, Middle Initial)

C. MICROTTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

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
0	2			1	1			2	0	1	6		

Transaction ID : SB21B.I5962

Amount of Each Disbursement this Period

3	8	8	.	0	4
---	---	---	---	---	---

Memo Item
MASON 2/18

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

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

0	0	0
---	---	---

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I6081

Amount of Each Disbursement this Period

11.00

Memo Item
MASON 2/18

Full Name (Last, First, Middle Initial)

B. TAYLOR MASON

Mailing Address 1081 EAGLEWOOD TRL

City CHARLESTON State SC Zip Code 29412

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5438

Amount of Each Disbursement this Period

7250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOGAN L MAXWELL

Mailing Address 1218 PINE ST

City HARLAN State IA Zip Code 51537

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5423

Amount of Each Disbursement this Period

112.00

Memo Item

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

7362.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JAMES M MCCURDY

Mailing Address 186 DEDHAM ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5352

Amount of Each Disbursement this Period

195.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KELSEY M MCGEE

Mailing Address 118 S HARDEN ST

City COLUMBIA State SC Zip Code 29205

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5395

Amount of Each Disbursement this Period

1846.16

Memo Item

Full Name (Last, First, Middle Initial)

C. KELSEY M MCGEE

Mailing Address 118 S HARDEN ST

City COLUMBIA State SC Zip Code 29205

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5396

Amount of Each Disbursement this Period

3019.24

Memo Item

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

5060.40

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. NICHOLAS S MCGEE

Mailing Address 8 RIVER WOODS DR.

City SCARBOROUGH State ME Zip Code 04074

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5478

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JAMES J MCGILL

Mailing Address 6 COUNTRY CLUB DR. APT #20
APT #20

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5350

Amount of Each Disbursement this Period

1269.24

Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES J MCGILL

Mailing Address 6 COUNTRY CLUB DR. APT #20
APT #20

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5351

Amount of Each Disbursement this Period

2153.86

Memo Item

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

6423.10

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MORGANNE R MCGUIRK

Mailing Address 4 S HAMPTON DR.

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5472

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

B. MORGANNE R MCGUIRK

Mailing Address 4 S HAMPTON DR.

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5473

Amount of Each Disbursement this Period

2326.93

Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELL A MCMONIGLE

Mailing Address 4515 STATE LINE RD

City KANSAS CITY State MO Zip Code 64111

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5464

Amount of Each Disbursement this Period

692.31

Memo Item

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

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

4403.86

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MITCHELL A MCMONIGLE

Mailing Address 4515 STATE LINE RD

City KANSAS CITY State MO Zip Code 64111

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5465

Amount of Each Disbursement this Period

1288.47

Memo Item

Full Name (Last, First, Middle Initial)

B. THEO M MENON

Mailing Address 13297 ASPEN DR.

City ROGERS State MN Zip Code 55374

Purpose of Disbursement SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5591

Amount of Each Disbursement this Period

276.93

Memo Item

Full Name (Last, First, Middle Initial)

C. THEO M MENON

Mailing Address 13297 ASPEN DR.

City ROGERS State MN Zip Code 55374

Purpose of Disbursement SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5592

Amount of Each Disbursement this Period

515.40

Memo Item

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

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

2080.80

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. THOMAS J MERCADO

Mailing Address 315 RIVERSIDE CHASE CIR

City GREER State SC Zip Code 29650

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5593

Amount of Each Disbursement this Period

692.31

Memo Item

Full Name (Last, First, Middle Initial)

B. THOMAS J MERCADO

Mailing Address 315 RIVERSIDE CHASE CIR

City GREER State SC Zip Code 29650

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5594

Amount of Each Disbursement this Period

1288.47

Memo Item

Full Name (Last, First, Middle Initial)

C. BRODIE F MILLER

Mailing Address 3341 DEER HARBOR RD

City EASTSOUND State WA Zip Code 98245

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5243

Amount of Each Disbursement this Period

354.00

Memo Item

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

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

2334.78

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BRODIE F MILLER

Mailing Address 3341 DEER HARBOR RD

City EASTSOUND State WA Zip Code 98245

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5244

Amount of Each Disbursement this Period

372.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CARLY J MILLER

Mailing Address 504 E 11TH ST

City ELLIS State KS Zip Code 67637

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5252

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

C. CARLY J MILLER

Mailing Address 504 E 11TH ST

City ELLIS State KS Zip Code 67637

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5253

Amount of Each Disbursement this Period

1980.78

Memo Item

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

3506.63

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JACE N MILLS

Mailing Address 1701 E 12TH AVE

City WINFIELD State KS Zip Code 67156

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5348

Amount of Each Disbursement this Period

692.31

Memo Item

Full Name (Last, First, Middle Initial)

B. JACE N MILLS

Mailing Address 1701 E 12TH AVE

City WINFIELD State KS Zip Code 67156

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5349

Amount of Each Disbursement this Period

1288.47

Memo Item

Full Name (Last, First, Middle Initial)

C. CHARLOTTE L MINDEMAN

Mailing Address 5526 S TOLEDO PL

City TULSA State OK Zip Code 74135

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5265

Amount of Each Disbursement this Period

923.08

Memo Item

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

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

2903.86

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHARLOTTE L MINDEMAN

Mailing Address 5526 S TOLEDO PL

City TULSA State OK Zip Code 74135

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5266

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

B. ALEXANDER S MOODY

Mailing Address 14 ROSECLIFF DR.

City NASHUA State NH Zip Code 03062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5193

Amount of Each Disbursement this Period

240.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MATTEO L MORAN

Mailing Address 6 COUNTRY CLUB DR. BLDG #6 APT #20

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5439

Amount of Each Disbursement this Period

1384.62

Memo Item

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

3009.24

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MATTEO L MORAN

Mailing Address 6 COUNTRY CLUB DR. BLDG #6 APT #20

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

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 / 2016

Transaction ID : SB21B.I5440

Amount of Each Disbursement this Period

692.31

Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER X MURPHY

Mailing Address 420 1/2 E ERIE ST #1

City MISSOURI VALLEY State IA Zip Code 51555

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5272

Amount of Each Disbursement this Period

1476.93

Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER X MURPHY

Mailing Address 420 1/2 E ERIE ST #1

City MISSOURI VALLEY State IA Zip Code 51555

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5273

Amount of Each Disbursement this Period

2465.40

Memo Item

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

4634.64

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CRAIG P MURPHY

Mailing Address 3701 KARALYN CT

City ARLINGTON State TX Zip Code 76016

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5289

Amount of Each Disbursement this Period

2307.69

Memo Item

Full Name (Last, First, Middle Initial)

B. CRAIG P MURPHY

Mailing Address 3701 KARALYN CT

City ARLINGTON State TX Zip Code 76016

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5290

Amount of Each Disbursement this Period

10961.54

Memo Item

Full Name (Last, First, Middle Initial)

C. CRAIG P MURPHY

Mailing Address 3701 KARALYN CT

City ARLINGTON State TX Zip Code 76016

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5474

Amount of Each Disbursement this Period

2993.40

Memo Item

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

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

16262.63

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

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FOR LINE NUMBER:
(check only one)

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BEST BUY

Mailing Address 7601 PENN AVE S

City RICHFIELD State MN Zip Code 55423

Purpose of Disbursement
CAMPAIGN ELECTRONIC EQUIPMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.I5680

Amount of Each Disbursement this Period

336.44

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5718

Amount of Each Disbursement this Period

8.36

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : SB21B.I5719

Amount of Each Disbursement this Period

15.70

Memo Item
MURPHY 2/18

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

0.00

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CUMBERLAND FARMS

Mailing Address 100 CROSSING BLVD

City State Zip Code
FRAMINGHAM MA 01702

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : SB21B.I5743

Amount of Each Disbursement this Period

18.73

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. DOLLAR RENTAL CAR

Mailing Address 5330 E 31ST ST

City State Zip Code
TULSA OK 74135

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2016

Transaction ID : SB21B.I5757

Amount of Each Disbursement this Period

46.20

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. DOLLAR RENTAL CAR

Mailing Address 5330 E 31ST ST

City State Zip Code
TULSA OK 74135

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I5758

Amount of Each Disbursement this Period

377.13

Memo Item
MURPHY 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DULLES AIRPORT

Mailing Address 1 AVIATION CIR

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5761

Amount of Each Disbursement this Period

374.00

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2016

Transaction ID : SB21B.I5767

Amount of Each Disbursement this Period

4.88

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5768

Amount of Each Disbursement this Period

22.38

Memo Item
MURPHY 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : **SB21B.I5769**

Amount of Each Disbursement this Period

2.17

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : **SB21B.I5770**

Amount of Each Disbursement this Period

6.64

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : **SB21B.I5771**

Amount of Each Disbursement this Period

8.68

Memo Item
MURPHY 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : SB21B.I5772

Amount of Each Disbursement this Period

5.32

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5773

Amount of Each Disbursement this Period

2.39

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR.

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5780

Amount of Each Disbursement this Period

515.32

Memo Item
MURPHY 2/18

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I5789

Amount of Each Disbursement this Period

20.65

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5790

Amount of Each Disbursement this Period

19.07

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. HILTON

Mailing Address 7930 JONES BRANCH DR., SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5828

Amount of Each Disbursement this Period

30.23

Memo Item
MURPHY 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5881

Amount of Each Disbursement this Period

18.04

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5882

Amount of Each Disbursement this Period

1.58

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5883

Amount of Each Disbursement this Period

5.55

Memo Item
MURPHY 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			3	1			2	0	1	6		

Transaction ID : SB21B.I5884

Amount of Each Disbursement this Period

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

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	9			2	0	1	6		

Transaction ID : SB21B.I5981

Amount of Each Disbursement this Period

1	2	.	5	1
---	---	---	---	---

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. RICHTER ANIMAL HOSPITAL

Mailing Address 4601 W SUBLETT RD

City ARLINGTON State TX Zip Code 76017

Purpose of Disbursement
BOARDING

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
0	2			1	1			2	0	1	6		

Transaction ID : SB21B.I5997

Amount of Each Disbursement this Period

5	9	6	.	8	4
---	---	---	---	---	---

Memo Item
MURPHY 2/18

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address 140 WEST ST

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement PHONES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6102

Amount of Each Disbursement this Period

117.11

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

B. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6124

Amount of Each Disbursement this Period

16.31

Memo Item
MURPHY 2/18

Full Name (Last, First, Middle Initial)

C. SHEILA J MURPHY

Mailing Address 420 1/2 E ERIE ST #1

City MISSOURI VALLEY State IA Zip Code 51555

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5549

Amount of Each Disbursement this Period

1476.93

Memo Item

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

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

1476.93

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SHEILA J MURPHY

Mailing Address 420 1/2 E ERIE ST #1

City MISSOURI VALLEY State IA Zip Code 51555

Purpose of Disbursement SALARY

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		26		2016

Transaction ID : SB21B.I5550

Amount of Each Disbursement this Period

2465.40

Memo Item

Full Name (Last, First, Middle Initial)

B. BENJAMIN P NEILEY

Mailing Address 475 COUNTRY RD 167

City GLENWOOD SPRINGS State CO Zip Code 81601

Purpose of Disbursement SALARY

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		11		2016

Transaction ID : SB21B.I5235

Amount of Each Disbursement this Period

294.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ALLEN R OAKES

Mailing Address 501 PLEASANTVIEW AVE

City SYRACUSE State NY Zip Code 13208

Purpose of Disbursement SALARY

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		2016

Transaction ID : SB21B.I5194

Amount of Each Disbursement this Period

501.00

Memo Item

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

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

3260.40

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ALLEN R OAKES

Mailing Address 501 PLEASANTVIEW AVE

City SYRACUSE State NY Zip Code 13208

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5195

Amount of Each Disbursement this Period

277.50

Memo Item

Full Name (Last, First, Middle Initial)

B. DAXTON C OBERREUTER

Mailing Address 2508 UNION RD LOT #211

City CEDER FALLS State IA Zip Code 50613

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5306

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

C. DAXTON C OBERREUTER

Mailing Address 2508 UNION RD LOT #211

City CEDER FALLS State IA Zip Code 50613

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5307

Amount of Each Disbursement this Period

1980.78

Memo Item

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

3412.13

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHIDOZIE D OBICHERE

Mailing Address 14328 BLUE GRANIE RD

City PINEVILLE State NC Zip Code 28134

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5267

Amount of Each Disbursement this Period

270.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTY L PAAVOLA

Mailing Address 220 CENTURY PL #3109 #3109

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5274

Amount of Each Disbursement this Period

2884.62

Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTY L PAAVOLA

Mailing Address 220 CENTURY PL #3109 #3109

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5275

Amount of Each Disbursement this Period

7076.93

Memo Item

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

10231.55

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHRISTY L PAAVOLA

Mailing Address 220 CENTURY PL #3109
#3109

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5483

Amount of Each Disbursement this Period

1670.97

Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTY L PAAVOLA

Mailing Address 220 CENTURY PL #3109
#3109

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5725

Amount of Each Disbursement this Period

1442.99

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

C. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2016

Transaction ID : SB21B.I5928

Amount of Each Disbursement this Period

71.23

Memo Item
PAAVOLA 2/18

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

1670.97

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6031

Amount of Each Disbursement this Period

5.27

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6032

Amount of Each Disbursement this Period

5.56

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6033

Amount of Each Disbursement this Period

6.22

Memo Item
PAAVOLA 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6034

Amount of Each Disbursement this Period

20.49

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

B. TARGET

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2016

Transaction ID : SB21B.I6050

Amount of Each Disbursement this Period

33.98

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I6072

Amount of Each Disbursement this Period

17.29

Memo Item
PAAVOLA 2/18

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

0.00

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)

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6073

Amount of Each Disbursement this Period

10.88

Memo Item
PAAVOLA 2/18

Full Name (Last, First, Middle Initial)

B. SCOTT PARADISE

Mailing Address 5416 W 97TH CIR

City OVERLAND PARK State KS Zip Code 66207

Purpose of Disbursement
GRASSROOTS CONSULTING

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 / 2016

Transaction ID : SB21B.I5539

Amount of Each Disbursement this Period

7750.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCOTT PARADISE

Mailing Address 5416 W 97TH CIR

City OVERLAND PARK State KS Zip Code 66207

Purpose of Disbursement
REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5540

Amount of Each Disbursement this Period

1215.58

Memo Item

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

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

8965.58

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. REGUS

Mailing Address P.O. BOX 842456

City DALLAS State TX Zip Code 75284

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I5996

Amount of Each Disbursement this Period

1	2	1	5	8
---	---	---	---	---

Memo Item
PARADISE 2/10

Full Name (Last, First, Middle Initial)

B. ANGELA F PARRISH

Mailing Address 933 SCOTT LN

City BELLE PLAINE State MN Zip Code 56011

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I5211

Amount of Each Disbursement this Period

5	3	8	.	4	6
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. ANGELA F PARRISH

Mailing Address 933 SCOTT LN

City BELLE PLAINE State MN Zip Code 56011

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I5212

Amount of Each Disbursement this Period

8	5	0	.	0	0
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Memo Item

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

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

1	3	8	.	4	6
---	---	---	---	---	---

1	3	8	.	4	6
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JENNIFER B PARRISH

Mailing Address 4118 MANOR VIEW DR. NW

City ROCHESTER State MN Zip Code 55901

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5355

Amount of Each Disbursement this Period

142.31

Memo Item

Full Name (Last, First, Middle Initial)

B. JENNIFER B PARRISH

Mailing Address 4118 MANOR VIEW DR. NW

City ROCHESTER State MN Zip Code 55901

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5356

Amount of Each Disbursement this Period

293.47

Memo Item

Full Name (Last, First, Middle Initial)

C. JODI M PEACOCK

Mailing Address 3101 N HAMPTON DR. \$1107

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5365

Amount of Each Disbursement this Period

576.93

Memo Item

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

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

1012.71

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JODI M PEACOCK

Mailing Address 3101 N HAMPTON DR. #1107

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5366

Amount of Each Disbursement this Period

865.40

Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAM J PEACOCK

Mailing Address 3101 N HAMPTON DR. #1107

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5639

Amount of Each Disbursement this Period

2076.93

Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM J PEACOCK

Mailing Address 3101 N HAMPTON DR. #1107

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5640

Amount of Each Disbursement this Period

5865.40

Memo Item

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

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

8807.73

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

Use separate schedule(s)
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JOHN M. PELLERGRINO

Mailing Address 8157 OLD SUNRIDGE RD

City MANLIUS State NY Zip Code 13104

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5373

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MR. A JERROLD PERENCHIO

Mailing Address 1999 AVENUE OF THE STARS
STE 3050

City LOS ANGELES State CA Zip Code 90067-4613

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : SB21B.139602

Amount of Each Disbursement this Period

1875.00

Memo Item

FUNDRAISING SERVICES

Full Name (Last, First, Middle Initial)

C. PATRICIA A PETIT

Mailing Address 54 BEAVER LANE

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5487

Amount of Each Disbursement this Period

510.00

Memo Item

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

2610.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PATRICIA A PETIT

Mailing Address 54 BEAVER LANE

City BEDFORD State NH Zip Code 03110

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5488

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MELISSA K PHAN

Mailing Address 205 N RADCLIFF WAY

City SPARTANBURG State SC Zip Code 29301

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5454

Amount of Each Disbursement this Period

90.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CHARLES J PISO

Mailing Address 402 TWEED RIVER DR.

City PITTSFIELD State VT Zip Code 05762

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5263

Amount of Each Disbursement this Period

1153.85

Memo Item

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

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

1303.85

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHARLES J PISO

Mailing Address 402 TWEED RIVER DR.

City PITTSFIELD State VT Zip Code 05762

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5264

Amount of Each Disbursement this Period

1980.78

Memo Item

Full Name (Last, First, Middle Initial)

B. MIRYAM V RABINOVICH

Mailing Address 204 PLEASANT ST

City PAXTON State MA Zip Code 01612

Purpose of Disbursement MILEAGE REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5460

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MIRYAM V RABINOVICH

Mailing Address 204 PLEASANT ST

City PAXTON State MA Zip Code 01612

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5461

Amount of Each Disbursement this Period

49.00

Memo Item

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

2129.78

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I6100

Amount of Each Disbursement this Period

49.00

Memo Item
RABINOVICH 2/3

Full Name (Last, First, Middle Initial)

B. MIRYAM V RABINOVICH

Mailing Address 204 PLEASANT ST

City PAXTON State MA Zip Code 01612

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	11	/	2016

Transaction ID : SB21B.I5462

Amount of Each Disbursement this Period

1846.16

Memo Item

Full Name (Last, First, Middle Initial)

C. MIRYAM V RABINOVICH

Mailing Address 204 PLEASANT ST

City PAXTON State MA Zip Code 01612

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2016

Transaction ID : SB21B.I5463

Amount of Each Disbursement this Period

3019.24

Memo Item

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

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

4865.40

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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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. IMAN REDZEPI

Mailing Address 8 WATERWAY RD

City WAYNE State NJ Zip Code 07470

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5347

Amount of Each Disbursement this Period

186.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KERRI E REEVES-SMITH

Mailing Address 4055 SPYGLASS RD

City OKLAHOMA CITY State OK Zip Code 73120

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5397

Amount of Each Disbursement this Period

923.08

Memo Item

Full Name (Last, First, Middle Initial)

C. KERRI E REEVES-SMITH

Mailing Address 4055 SPYGLASS RD

City OKLAHOMA CITY State OK Zip Code 73120

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5398

Amount of Each Disbursement this Period

1384.62

Memo Item

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

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

2493.70

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TAYLOR P RHODES

Mailing Address 2014 WOODCHASE WAY NE

City CLEVELAND State TN Zip Code 37311

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5584

Amount of Each Disbursement this Period

417.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAYLOR P RHODES

Mailing Address 2014 WOODCHASE WAY NE

City CLEVELAND State TN Zip Code 37311

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5585

Amount of Each Disbursement this Period

513.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DANIELLE L RIEGER

Mailing Address 13 SILVESTRI CIR UNIT #23
UNIT #23

City DERRY State NH Zip Code 03038

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5297

Amount of Each Disbursement this Period

1269.24

Memo Item

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

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

2199.24

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DANIELLE L RIEGER

Mailing Address 13 SILVESTRI CIR UNIT #23
UNIT #23

City DERRY State NH Zip Code 03038

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5298

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LUIS M RODRIGUEZ

Mailing Address 425 CORAL SEA ST

City HENDERSON State NV Zip Code 89074

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5425

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ALEXANDER H ROUNTREE

Mailing Address 118 CHINKAPIN LOOP

City OXFORD State MS Zip Code 38655

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5192

Amount of Each Disbursement this Period

Memo Item

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. REID B RYAN

Mailing Address 510 NE 24TH CT

City ANKENY State IA Zip Code 50021

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5511

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

B. AUDREY C SCAGNELLI

Mailing Address 440 LUEGNA AVE

City CORAL GABLES State FL Zip Code 33146

Purpose of Disbursement REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5227

Amount of Each Disbursement this Period

1148.51

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2016

Transaction ID : SB21B.I5662

Amount of Each Disbursement this Period

487.20

Memo Item
SCAGNELLI 2/2

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

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

2302.36

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DAYS INN

Mailing Address 1 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5748

Amount of Each Disbursement this Period

500.19

Memo Item
SCAGNELLI 2/2

Full Name (Last, First, Middle Initial)

B. HERTZ

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2016

Transaction ID : SB21B.I5826

Amount of Each Disbursement this Period

75.13

Memo Item
SCAGNELLI 2/2

Full Name (Last, First, Middle Initial)

C. SOUTHWEST

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : SB21B.I6015

Amount of Each Disbursement this Period

8.00

Memo Item
SCAGNELLI 2/2

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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		06		2016

Transaction ID : SB21B.I6024

Amount of Each Disbursement this Period

4	3	5	1
---	---	---	---

Memo Item
SCAGNELLI 2/2

Full Name (Last, First, Middle Initial)

B. AUDREY C SCAGNELLI

Mailing Address 440 LUEGNA AVE

City CORAL GABLES State FL Zip Code 33146

Purpose of Disbursement
SALARY

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		11		2016

Transaction ID : SB21B.I5228

Amount of Each Disbursement this Period

1	9	2	3	0	8
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. AUDREY C SCAGNELLI

Mailing Address 440 LUEGNA AVE

City CORAL GABLES State FL Zip Code 33146

Purpose of Disbursement
SALARY

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		26		2016

Transaction ID : SB21B.I5229

Amount of Each Disbursement this Period

2	8	8	4	6	2
---	---	---	---	---	---

Memo Item

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

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

4	8	0	7	7
---	---	---	---	---

4	8	0	7	7
---	---	---	---	---

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SIERRA V SCARNATI

Mailing Address 1643 S 114TH AVE E

City MONROE State IA Zip Code 50170

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5551

Amount of Each Disbursement this Period

235.50

Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN B SCHLER

Mailing Address 30 SOUTH ST UNIT # 8

City LACONIA State NH Zip Code 03246

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5367

Amount of Each Disbursement this Period

498.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN B SCHLER

Mailing Address 30 SOUTH ST UNIT # 8

City LACONIA State NH Zip Code 03246

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5368

Amount of Each Disbursement this Period

142.50

Memo Item

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

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

876.00

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BENJAMIN A. SCHNEIER

Mailing Address 8717 ANZIO ST

City State Zip Code
FORT IRWIN CA 92310

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5231

Amount of Each Disbursement this Period

441.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BENJAMIN A. SCHNEIER

Mailing Address 8717 ANZIO ST

City State Zip Code
FORT IRWIN CA 92310

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5232

Amount of Each Disbursement this Period

513.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SRIVATSAN SENTHILKUMAR

Mailing Address 3 HOLLYHOCK AVE

City State Zip Code
NASHUA NH 03062

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5561

Amount of Each Disbursement this Period

144.00

Memo Item

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

1098.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SRIVATSAN SENTHILKUMAR

Mailing Address 3 HOLLYHOCK AVE

City NASHUA State NH Zip Code 03062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2016

Transaction ID : SB21B.I5562

Amount of Each Disbursement this Period

240.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LESLIE C SHEDD

Mailing Address 70 I ST SE #1118 #1118

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I5414

Amount of Each Disbursement this Period

917.56

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2016

Transaction ID : SB21B.I5663

Amount of Each Disbursement this Period

35.00

Memo Item
SHEDD 2/10

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

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

1157.56

**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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I5664

Amount of Each Disbursement this Period

35.00

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City State Zip Code
ATLANTA GA 30349

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5714

Amount of Each Disbursement this Period

11.49

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

C. DOLLAR RENTAL CAR

Mailing Address 5330 E 31ST ST

City State Zip Code
TULSA OK 74135

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I5756

Amount of Each Disbursement this Period

139.19

Memo Item
SHEDD 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. GRANITE CITY FOOD & BREWERY

Mailing Address 12801 UNIVERSITY AVE

City CLIVE State IA Zip Code 50325

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I5812

Amount of Each Disbursement this Period

3	0	0	5
---	---	---	---

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

B. HILTON

Mailing Address 7930 JONES BRANCH DR., SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
FOOD/BEVERAGES

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
0	2			0	1			2	0	1	6		

Transaction ID : SB21B.I5827

Amount of Each Disbursement this Period

1	7	4	2
---	---	---	---

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

C. HY-VEE

Mailing Address 5820 WESTOWN PKWY

City DES MOINES State IA Zip Code 50266

Purpose of Disbursement
TRAVEL

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
0	2			0	2			2	0	1	6		

Transaction ID : SB21B.I5838

Amount of Each Disbursement this Period

1	4	0	2
---	---	---	---

Memo Item
SHEDD 2/10

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

0	0	0
---	---	---

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

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5907

Amount of Each Disbursement this Period

85.39

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

B. OFFICEMAX

Mailing Address 263 SHUMAN BLVD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I5970

Amount of Each Disbursement this Period

181.10

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

C. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5976

Amount of Each Disbursement this Period

20.52

Memo Item
SHEDD 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

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		27		2016

Transaction ID : SB21B.I5977

Amount of Each Disbursement this Period

21.78

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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		22		2016

Transaction ID : SB21B.I6064

Amount of Each Disbursement this Period

4.95

Memo Item
SHEDD 2/10

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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		01		2016

Transaction ID : SB21B.I6116

Amount of Each Disbursement this Period

10.98

Memo Item
SHEDD 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LESLIE C SHEDD

Mailing Address 70 I ST SE #1118
#1118

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5415

Amount of Each Disbursement this Period

9075.04

Memo Item

Full Name (Last, First, Middle Initial)

B. SEBASTIAN T. SHEEHAN

Mailing Address 707 NTH TENTH

City FAIRFIELD State IA Zip Code 52556

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5542

Amount of Each Disbursement this Period

207.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELL S SHUGARS

Mailing Address 207 WINDWARD WAY

City GREER State SC Zip Code 29650

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5471

Amount of Each Disbursement this Period

97.50

Memo Item

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

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

9379.54

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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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SCOT H SHUMSKI

Mailing Address 819 NORTH AVENUE

City BURLINGTON State VT Zip Code 05408

Purpose of Disbursement
REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5534

Amount of Each Disbursement this Period

292.50

Memo Item

Full Name (Last, First, Middle Initial)

B. COSTCO

Mailing Address 999 LAKE DR

City ISSAQUAH State WA Zip Code 98027

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.I5737

Amount of Each Disbursement this Period

292.50

Memo Item
SHUMSKI 2/10

Full Name (Last, First, Middle Initial)

C. SCOT H SHUMSKI

Mailing Address 819 NORTH AVENUE

City BURLINGTON State VT Zip Code 05408

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5535

Amount of Each Disbursement this Period

1846.16

Memo Item

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

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

2138.66

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SCOT H SHUMSKI

Mailing Address 819 NORTH AVENUE

City BURLINGTON State VT Zip Code 05408

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5536

Amount of Each Disbursement this Period

3019.24

Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN B SIMPSON JR.

Mailing Address 640 LINKSIDE HOLLOW

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5369

Amount of Each Disbursement this Period

1615.39

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN B SIMPSON JR.

Mailing Address 640 LINKSIDE HOLLOW

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5370

Amount of Each Disbursement this Period

2673.09

Memo Item

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

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

7307.72

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SUSAN S SLANE

Mailing Address 20 LEGACY DR.

City NASHUA State NH Zip Code 03062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5579

Amount of Each Disbursement this Period

96.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SUSAN S SLANE

Mailing Address 20 LEGACY DR.

City NASHUA State NH Zip Code 03062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2016

Transaction ID : SB21B.I5580

Amount of Each Disbursement this Period

135.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NATHAN D SNELL

Mailing Address 196 80TH AVE

City NORWALK State IA Zip Code 50211

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5475

Amount of Each Disbursement this Period

611.55

Memo Item

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

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

842.55

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

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

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(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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. NATHAN D SNELL

Mailing Address 196 80TH AVE

City NORWALK State IA Zip Code 50211

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5476

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PHOEBE J SOCHA

Mailing Address 92 RIVERVIEW PARK RD

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5497

Amount of Each Disbursement this Period

81.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ERIK L SODERSTROM

Mailing Address 101 GATEWAY CT APT 406

City CHESAPEAKE State VA Zip Code 23320

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5324

Amount of Each Disbursement this Period

1865.39

Memo Item

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

1996.39

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ERIK L SODERSTROM

Mailing Address 101 GATEWAY CT APT 406

City CHESAPEAKE State VA Zip Code 23320

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2016

Transaction ID : SB21B.I5325

Amount of Each Disbursement this Period

2423.09

Memo Item

Full Name (Last, First, Middle Initial)

B. LYNN A SORENSEN

Mailing Address 5 COLONIAL CT APT #501

City LITTLETON State NH Zip Code 03561

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5426

Amount of Each Disbursement this Period

432.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LYNN A SORENSEN

Mailing Address 5 COLONIAL CT APT #501

City LITTLETON State NH Zip Code 03561

Purpose of Disbursement SALARY

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 / 2016

Transaction ID : SB21B.I5427

Amount of Each Disbursement this Period

216.00

Memo Item

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

3071.09

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DAVID P STEELE

Mailing Address 7242 72ND LNN

City State Zip Code
BROOKLYN PARK MN 55428

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5304

Amount of Each Disbursement this Period

276.93

Memo Item

Full Name (Last, First, Middle Initial)

B. DAVID P STEELE

Mailing Address 7242 72ND LNN

City State Zip Code
BROOKLYN PARK MN 55428

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5305

Amount of Each Disbursement this Period

415.40

Memo Item

Full Name (Last, First, Middle Initial)

C. MATTHEW T STRAUSS

Mailing Address 2322 HUIDEKOPER PL NW

City State Zip Code
WASHINGTON DC 20007

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5442

Amount of Each Disbursement this Period

1730.77

Memo Item

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

2423.10

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MATTHEW T STRAUSS

Mailing Address 2322 HUIDEKOPER PL NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5443

Amount of Each Disbursement this Period

769.80

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5667

Amount of Each Disbursement this Period

35.32

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5668

Amount of Each Disbursement this Period

25.00

Memo Item
STRAUSS 2/18

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

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

769.80

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5669

Amount of Each Disbursement this Period

25.00

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5720

Amount of Each Disbursement this Period

6.41

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5749

Amount of Each Disbursement this Period

25.00

Memo Item
STRAUSS 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5750

Amount of Each Disbursement this Period

59.00

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5775

Amount of Each Disbursement this Period

4.57

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5776

Amount of Each Disbursement this Period

8.02

Memo Item
STRAUSS 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			0	7			2	0	1	6		

Transaction ID : SB21B.I5885

Amount of Each Disbursement this Period

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

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I5886

Amount of Each Disbursement this Period

7	.	1	8
---	---	---	---

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	8			2	0	1	6		

Transaction ID : SB21B.I5887

Amount of Each Disbursement this Period

3	.	4	5
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Memo Item
STRAUSS 2/18

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

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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		28		2016

Transaction ID : SB21B.I5888

Amount of Each Disbursement this Period

4.58

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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		28		2016

Transaction ID : SB21B.I5889

Amount of Each Disbursement this Period

4.68

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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		2016

Transaction ID : SB21B.I5890

Amount of Each Disbursement this Period

8.07

Memo Item
STRAUSS 2/18

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

0.00

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5891

Amount of Each Disbursement this Period

5.44

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I5892

Amount of Each Disbursement this Period

5.11

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5893

Amount of Each Disbursement this Period

11.67

Memo Item
STRAUSS 2/18

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			0	8			2	0	1	6		

Transaction ID : SB21B.I5920

Amount of Each Disbursement this Period

1	7	.	5	6
---	---	---	---	---

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			0	8			2	0	1	6		

Transaction ID : SB21B.I5921

Amount of Each Disbursement this Period

2	7	.	2	4
---	---	---	---	---

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I5922

Amount of Each Disbursement this Period

1	2	.	0	0
---	---	---	---	---

Memo Item
STRAUSS 2/18

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5923

Amount of Each Disbursement this Period

33.00

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5924

Amount of Each Disbursement this Period

12.00

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. OFFICEMAX

Mailing Address 263 SHUMAN BLVD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement
OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I5974

Amount of Each Disbursement this Period

149.24

Memo Item
STRAUSS 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6074

Amount of Each Disbursement this Period

16.98

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6075

Amount of Each Disbursement this Period

11.55

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I6125

Amount of Each Disbursement this Period

10.46

Memo Item
STRAUSS 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	8			2	0	1	6		

Transaction ID : SB21B.I6126

Amount of Each Disbursement this Period

8	3	4
---	---	---

Memo Item
STRAUSS 2/18

Full Name (Last, First, Middle Initial)

B. MATTHEW T STRAUSS

Mailing Address 2322 HUIDEKOPER PL NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
SALARY

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
0	2			2	6			2	0	1	6		

Transaction ID : SB21B.I5444

Amount of Each Disbursement this Period

5	0	9	6	.	1	6
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. JOSHUA J STUDEBAKER

Mailing Address 2504 COLLEGE ST

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement
SALARY

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
0	2			1	1			2	0	1	6		

Transaction ID : SB21B.I5381

Amount of Each Disbursement this Period

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

Memo Item

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

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

5	4	0	6	.	9	6
---	---	---	---	---	---	---

5	4	0	6	.	9	6
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JOSHUA J STUDEBAKER

Mailing Address 2504 COLLEGE ST

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5382

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANNA K TARNAWSKI

Mailing Address 2109 MILL RD APT 307
APT #522

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5216

Amount of Each Disbursement this Period

702.54

Memo Item

Full Name (Last, First, Middle Initial)

C. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
GAS

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 / 2016

Transaction ID : SB21B.I5710

Amount of Each Disbursement this Period

22.49

Memo Item
TARNAWSKI 2/2

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

802.54

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CASEYS GENERAL STORE

Mailing Address 1 SE CONVENIENCE BLVD

City ANKENY State IA Zip Code 50021

Purpose of Disbursement
FOOD/BEVERAGES

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		22		2016

Transaction ID : SB21B.I5711

Amount of Each Disbursement this Period

14.39

Memo Item
TARNAWSKI 2/2

Full Name (Last, First, Middle Initial)

B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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		22		2016

Transaction ID : SB21B.I6035

Amount of Each Disbursement this Period

20.00

Memo Item
TARNAWSKI 2/2

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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		2016

Transaction ID : SB21B.I6036

Amount of Each Disbursement this Period

15.00

Memo Item
TARNAWSKI 2/2

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2016

Transaction ID : SB21B.I6051

Amount of Each Disbursement this Period

501.67

Memo Item
TARNAWSKI 2/2

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2016

Transaction ID : SB21B.I6076

Amount of Each Disbursement this Period

13.38

Memo Item
TARNAWSKI 2/2

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2016

Transaction ID : SB21B.I6077

Amount of Each Disbursement this Period

17.96

Memo Item
TARNAWSKI 2/2

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address P.O. BOX 06649

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2016

Transaction ID : SB21B.I6086

Amount of Each Disbursement this Period

25.00

Memo Item
TARNAWSKI 2/2

Full Name (Last, First, Middle Initial)

B. ANNA K TARNAWSKI

Mailing Address 2109 MILL RD APT 307
APT #522

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement REIMBURSEMENT

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 / 2016

Transaction ID : SB21B.I5217

Amount of Each Disbursement this Period

2002.60

Memo Item

Full Name (Last, First, Middle Initial)

C. BIAGGI'S

Mailing Address 1705 CLEARWATER AVE

City BLOOMINGTON State IL Zip Code 61704

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I5683

Amount of Each Disbursement this Period

15.89

Memo Item
TARNAWSKI 2/10

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

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

2002.60

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EMBASSY SUITES

Mailing Address 7930 JONES BRANCH DR.

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5779

Amount of Each Disbursement this Period

218.66

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. GRANITE CITY FOOD & BREWERY

Mailing Address 12801 UNIVERSITY AVE

City CLIVE State IA Zip Code 50325

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I5813

Amount of Each Disbursement this Period

13.61

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. HY-VEE

Mailing Address 5820 WESTOWN PKWY

City DES MOINES State IA Zip Code 50266

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I5840

Amount of Each Disbursement this Period

4.87

Memo Item
TARNAWSKI 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HY-VEE

Mailing Address 5820 WESTOWN PKWY

City DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5841

Amount of Each Disbursement this Period

13.58

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2016

Transaction ID : SB21B.I5894

Amount of Each Disbursement this Period

31.01

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5895

Amount of Each Disbursement this Period

7.51

Memo Item
TARNAWSKI 2/10

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I5925

Amount of Each Disbursement this Period

11.00

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5982

Amount of Each Disbursement this Period

11.95

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I6037

Amount of Each Disbursement this Period

17.23

Memo Item
TARNAWSKI 2/10

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6038

Amount of Each Disbursement this Period

33.07

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6039

Amount of Each Disbursement this Period

4.06

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. THRIFTY CAR RENTAL

Mailing Address 5330 E 31ST ST

City TULSA State OK Zip Code 74135

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6060

Amount of Each Disbursement this Period

1504.76

Memo Item
TARNAWSKI 2/10

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

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

0.00

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

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<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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6078

Amount of Each Disbursement this Period

22.25

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6079

Amount of Each Disbursement this Period

11.15

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6080

Amount of Each Disbursement this Period

14.64

Memo Item
TARNAWSKI 2/10

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I6127

Amount of Each Disbursement this Period

17.12

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

B. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I6128

Amount of Each Disbursement this Period

6.29

Memo Item
TARNAWSKI 2/10

Full Name (Last, First, Middle Initial)

C. ANNA K TARNAWSKI

Mailing Address 2109 MILL RD APT 307
APT #522

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5218

Amount of Each Disbursement this Period

1846.15

Memo Item

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

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

1846.15

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ANNA K TARNAWSKI

Mailing Address 2109 MILL RD APT 307
APT #522

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
SALARY

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	/	26	/	2016

Transaction ID : SB21B.I5219

Amount of Each Disbursement this Period

2769.23

Memo Item

Full Name (Last, First, Middle Initial)

B. BENJAMIN J TASKER

Mailing Address 96 BOROUGH RD

City PENACOOK State NH Zip Code 03303

Purpose of Disbursement
SALARY

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	/	11	/	2016

Transaction ID : SB21B.I5233

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BENJAMIN J TASKER

Mailing Address 96 BOROUGH RD

City PENACOOK State NH Zip Code 03303

Purpose of Disbursement
SALARY

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	/	15	/	2016

Transaction ID : SB21B.I5234

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

4119.23

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LAWRENCE N TASKER III

Mailing Address 96 BOROUGH RD

City PENACOOK State NH Zip Code 03303

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5412

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LAWRENCE N TASKER III

Mailing Address 96 BOROUGH RD

City PENACOOK State NH Zip Code 03303

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5413

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STANLEY F TRASK III

Mailing Address 53 ROD GUN CLUB R2

City CHESTER State NH Zip Code 03036

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5563

Amount of Each Disbursement this Period

1023.00

Memo Item

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

2373.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SAMUEL G VETTER

Mailing Address 654 SCHUYLER DR.

City State Zip Code
ROCK HILL SC 29730

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5525

Amount of Each Disbursement this Period

1384.62

Memo Item

Full Name (Last, First, Middle Initial)

B. SAMUEL G VETTER

Mailing Address 654 SCHUYLER DR.

City State Zip Code
ROCK HILL SC 29730

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5526

Amount of Each Disbursement this Period

2326.93

Memo Item

Full Name (Last, First, Middle Initial)

C. LISA M WARK

Mailing Address 2142 CAST PEBBLE DR.

City State Zip Code
LAS VEGAS NV 89135

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5419

Amount of Each Disbursement this Period

1384.62

Memo Item

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

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

5096.17

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LISA M WARK

Mailing Address 2142 CAST PEBBLE DR.

City LAS VEGAS State NV Zip Code 89135

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5420

Amount of Each Disbursement this Period

2326.93

Memo Item

Full Name (Last, First, Middle Initial)

B. MELINDA L WERTZ

Mailing Address 1308 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5451

Amount of Each Disbursement this Period

1346.16

Memo Item

Full Name (Last, First, Middle Initial)

C. MELINDA L WERTZ

Mailing Address 1308 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5452

Amount of Each Disbursement this Period

1530.95

Memo Item

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

5204.04

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I5666

Amount of Each Disbursement this Period

25.00

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City State Zip Code
ATLANTA GA 30349

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : SB21B.I5715

Amount of Each Disbursement this Period

9.42

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City State Zip Code
CANTON MA 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2015

Transaction ID : SB21B.I5762

Amount of Each Disbursement this Period

2.67

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2015

Transaction ID : SB21B.I5763

Amount of Each Disbursement this Period

2.90

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2015

Transaction ID : SB21B.I5764

Amount of Each Disbursement this Period

2.90

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I5765

Amount of Each Disbursement this Period

12.34

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement
FOOD/BEVERAGES

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
02	/	08	/	2016

Transaction ID : SB21B.I5766

Amount of Each Disbursement this Period

9.11

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 27-01 QUEENS PLAZA NORTH

City LONG ISLAND State NY Zip Code 11101

Purpose of Disbursement
TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I5852

Amount of Each Disbursement this Period

60.00

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	09	/	2016

Transaction ID : SB21B.I5860

Amount of Each Disbursement this Period

1.05

Memo Item
WERTZ 2/18

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : SB21B.I5861

Amount of Each Disbursement this Period

4.45

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : SB21B.I5862

Amount of Each Disbursement this Period

9.43

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5863

Amount of Each Disbursement this Period

6.02

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I5864

Amount of Each Disbursement this Period

4	.	6	5
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I5865

Amount of Each Disbursement this Period

4	.	9	8
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.I5866

Amount of Each Disbursement this Period

1	.	4	1
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Memo Item
WERTZ 2/18

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

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

0	.	0	0
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0	.	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	6			2	0	1	6		

Transaction ID : SB21B.I5867

Amount of Each Disbursement this Period

6	.	6	1
---	---	---	---

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. KUM AND GO

Mailing Address 6400 WESTOWN PKWY

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement
FOOD/BEVERAGES

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
0	2			0	1			2	0	1	6		

Transaction ID : SB21B.I5868

Amount of Each Disbursement this Period

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

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			0	9			2	0	1	6		

Transaction ID : SB21B.I5908

Amount of Each Disbursement this Period

2	2	.	1	1
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Memo Item
WERTZ 2/18

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

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

0	.	0	0
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0	.	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	1			2	0	1	6		

Transaction ID : SB21B.I5909

Amount of Each Disbursement this Period

6	.	2	9
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	2			2	0	1	6		

Transaction ID : SB21B.I5910

Amount of Each Disbursement this Period

4	.	6	4
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	2			2	0	1	6		

Transaction ID : SB21B.I5911

Amount of Each Disbursement this Period

1	5	.	0	0
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Memo Item
WERTZ 2/18

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

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

0	.	0	0
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0	.	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	4			2	0	1	6		

Transaction ID : SB21B.I5912

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	0	0
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	8			2	0	1	6		

Transaction ID : SB21B.I5913

Amount of Each Disbursement this Period

1	6	2	3	0	0	0	0	0	0	.	0	0
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	8			2	0	1	6		

Transaction ID : SB21B.I5914

Amount of Each Disbursement this Period

1	6	7	6	0	0	0	0	0	0	.	0	0
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Memo Item
WERTZ 2/18

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

0	0	0	0	0	0	0	0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0	0	0	0	0	0	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			1	9			2	0	1	6		

Transaction ID : SB21B.I5915

Amount of Each Disbursement this Period

1	8	0	0
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	1			2	0	1	6		

Transaction ID : SB21B.I5916

Amount of Each Disbursement this Period

1	2	0	0
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	3			2	0	1	6		

Transaction ID : SB21B.I5917

Amount of Each Disbursement this Period

1	6	5	9
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Memo Item
WERTZ 2/18

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

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

0	0	0	0
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0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2016

Transaction ID : SB21B.I5918

Amount of Each Disbursement this Period

30.00

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. LEGENDS AMERICAN GRILL

Mailing Address 640 S 50TH ST

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I5919

Amount of Each Disbursement this Period

17.06

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I5978

Amount of Each Disbursement this Period

6.44

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I5979

Amount of Each Disbursement this Period

11.32

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. PANERA BREAD CO

Mailing Address 3630 S GEYER RD STE 100

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5980

Amount of Each Disbursement this Period

13.70

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2016

Transaction ID : SB21B.I6025

Amount of Each Disbursement this Period

3.57

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I6026

Amount of Each Disbursement this Period

2.12

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2016

Transaction ID : SB21B.I6027

Amount of Each Disbursement this Period

6.10

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2016

Transaction ID : SB21B.I6028

Amount of Each Disbursement this Period

8.15

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6029

Amount of Each Disbursement this Period

2.12

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. STARBUCKS

Mailing Address 2401 UTAH AVE S

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6030

Amount of Each Disbursement this Period

4.57

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. TECHSMITH

Mailing Address 2405 WOODLAKE DR.

City OKEMOS State MI Zip Code 48864

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2016

Transaction ID : SB21B.I6056

Amount of Each Disbursement this Period

299.00

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
11			05			2015			

Transaction ID : SB21B.I6065

Amount of Each Disbursement this Period

14.72

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
11			08			2015			

Transaction ID : SB21B.I6066

Amount of Each Disbursement this Period

13.87

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
01			07			2016			

Transaction ID : SB21B.I6067

Amount of Each Disbursement this Period

6.50

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			0	9			2	0	1	6		

Transaction ID : SB21B.I6068

Amount of Each Disbursement this Period

6	.	8	0
---	---	---	---

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			1	0			2	0	1	6		

Transaction ID : SB21B.I6069

Amount of Each Disbursement this Period

4	.	9	4
---	---	---	---

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

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
0	1			1	0			2	0	1	6		

Transaction ID : SB21B.I6070

Amount of Each Disbursement this Period

9	.	1	5
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Memo Item
WERTZ 2/18

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

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

0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

Transaction ID : SB21B.I6071

Amount of Each Disbursement this Period

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

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address P.O. BOX 06649

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I6084

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address P.O. BOX 06649

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	6

Transaction ID : SB21B.I6085

Amount of Each Disbursement this Period

1	6	0	0
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Memo Item
WERTZ 2/18

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

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

0	.	0	0
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0	.	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2016

Transaction ID : SB21B.I6107

Amount of Each Disbursement this Period

11.12

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I6117

Amount of Each Disbursement this Period

6.83

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I6118

Amount of Each Disbursement this Period

13.55

Memo Item
WERTZ 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	5			2	0	1	6		

Transaction ID : SB21B.I6119

Amount of Each Disbursement this Period

1	5	.	5	1
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Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I6120

Amount of Each Disbursement this Period

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

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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
0	1			2	8			2	0	1	6		

Transaction ID : SB21B.I6121

Amount of Each Disbursement this Period

1	6	.	8	8
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Memo Item
WERTZ 2/18

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

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

0	0	0
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0	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6122

Amount of Each Disbursement this Period

25.36

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

B. WHOLE FOODS

Mailing Address 550 BOWIE ST

City AUSTIN State TX Zip Code 78703

Purpose of Disbursement
FOOD/BEVERAGES

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 / 2016

Transaction ID : SB21B.I6123

Amount of Each Disbursement this Period

14.40

Memo Item
WERTZ 2/18

Full Name (Last, First, Middle Initial)

C. MELINDA L WERTZ

Mailing Address 1308 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5453

Amount of Each Disbursement this Period

2019.24

Memo Item

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

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

2019.24

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SARAH E WILSON

Mailing Address 211 BATESVIEW DR. APT #37

City GREENVILLE State SC Zip Code 29607

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5529

Amount of Each Disbursement this Period

1153.85

Memo Item

Full Name (Last, First, Middle Initial)

B. SARAH E WILSON

Mailing Address 211 BATESVIEW DR. APT #37

City GREENVILLE State SC Zip Code 29607

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5530

Amount of Each Disbursement this Period

1980.78

Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER M ZHEN

Mailing Address 2210 N. 160TH ST

City OMAHA State NE Zip Code 68116

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5271

Amount of Each Disbursement this Period

153.00

Memo Item

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

3287.63

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MARY Y ZHU

Mailing Address 15 SUTHERLAND WAY

City NASHUA State NH Zip Code 03062

Purpose of Disbursement SALARY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5435

Amount of Each Disbursement this Period

84.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LEXI STEMPLE

Mailing Address 1996 WEST GALILEO DRIVE

City PUEBLO WEST State CO Zip Code 81007

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5416

Amount of Each Disbursement this Period

1056.29

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5665

Amount of Each Disbursement this Period

25.00

Memo Item
STEMPLE 2/18

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

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

1140.29

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CVS

Mailing Address 1 CVS DR

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5746

Amount of Each Disbursement this Period

11.05

Memo Item
STEMPLE 2/18

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address P.O. BOX 06649

City Chicago State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I6082

Amount of Each Disbursement this Period

25.00

Memo Item
STEMPLE 2/18

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address P.O. BOX 06649

City Chicago State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I6083

Amount of Each Disbursement this Period

8.99

Memo Item
STEMPLE 2/18

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LEXI STEMPLE

Mailing Address 1996 WEST GALILEO DRIVE

City PUEBLO WEST State CO Zip Code 81007

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5417

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5187

Amount of Each Disbursement this Period

49.99

Memo Item

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5188

Amount of Each Disbursement this Period

124.98

Memo Item

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

10174.97

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5198

Amount of Each Disbursement this Period

1055.55

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5199

Amount of Each Disbursement this Period

33.92

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5200

Amount of Each Disbursement this Period

198.10

Memo Item

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

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

1287.57

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5201

Amount of Each Disbursement this Period

23.10

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5202

Amount of Each Disbursement this Period

456.60

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I5203

Amount of Each Disbursement this Period

418.10

Memo Item

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

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

897.80

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City State Zip Code
FORT WORTH TX 76155

Purpose of Disbursement
TRAVEL

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	/	16	/	2016

Transaction ID : SB21B.I5204

Amount of Each Disbursement this Period

696.20

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 200 VESEY ST

City State Zip Code
NEW YORK NY 10285

Purpose of Disbursement
CREDIT CARD PAYMENT

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	/	24	/	2016

Transaction ID : SB21B.I4618

Amount of Each Disbursement this Period

74734.69

Memo Item

Full Name (Last, First, Middle Initial)

C. ABF TRANSPORTATION

Mailing Address P.O. BOX 10048

City State Zip Code
FORT SMITH AR 72917

Purpose of Disbursement
TRANSPORTATION & SHIPPING

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	/	11	/	2016

Transaction ID : SB21B.I6219

Amount of Each Disbursement this Period

1655.00

Memo Item
AMEX FEBURARY 2016

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

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

75430.89

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ADVANTAGE RENT A CAR

Mailing Address 23790 E 78TH AVE

City DENVER State CO Zip Code 80249

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6220

Amount of Each Disbursement this Period

512.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. ALAMO

Mailing Address 600 CORPORATE LAKE DR

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6221

Amount of Each Disbursement this Period

255.23

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I4744

Amount of Each Disbursement this Period

58.94

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

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 / 2016

Transaction ID : SB21B.I4745

Amount of Each Disbursement this Period

58.94

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I4768

Amount of Each Disbursement this Period

50.52

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4723

Amount of Each Disbursement this Period

25.00

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

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
0	1			2	8			2	0	1	6		

Transaction ID : SB21B.I4777

Amount of Each Disbursement this Period

8	4	.	0	0
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

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
0	1			2	9			2	0	1	6		

Transaction ID : SB21B.I4781

Amount of Each Disbursement this Period

1	8	.	4	0
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TRAVEL

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
0	2			0	4			2	0	1	6		

Transaction ID : SB21B.I6165

Amount of Each Disbursement this Period

7	.	0	0
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Memo Item
AMEX FEBURARY 2016

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

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

0	.	0	0
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0	.	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : SB21B.I4720

Amount of Each Disbursement this Period

162.15

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4724

Amount of Each Disbursement this Period

45.90

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I4737

Amount of Each Disbursement this Period

990.69

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I4738

Amount of Each Disbursement this Period

990.69

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
REFUND - CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I4739

Amount of Each Disbursement this Period

-313.33

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6131

Amount of Each Disbursement this Period

122.85

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

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 / 2016

Transaction ID : SB21B.I6136

Amount of Each Disbursement this Period

139.84

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

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 / 2016

Transaction ID : SB21B.I6137

Amount of Each Disbursement this Period

139.84

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

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 / 2016

Transaction ID : SB21B.I6138

Amount of Each Disbursement this Period

139.84

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

A. CARTRAWLER

Mailing Address 184 HIGH ST, 7TH FLOOR SUITE 701

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
CAR RENTAL

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 / 2016

Transaction ID : SB21B.I6139

Amount of Each Disbursement this Period

139.84

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. COBBLESTONE INN & SUITES

Mailing Address 208 EAST BREMER AVE

City WAVERLY State IA Zip Code 50677

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4725

Amount of Each Disbursement this Period

102.66

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. COBBLESTONE INN & SUITES

Mailing Address 208 EAST BREMER AVE

City WAVERLY State IA Zip Code 50677

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4726

Amount of Each Disbursement this Period

102.66

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. COBBLESTONE INN & SUITES

Mailing Address 208 EAST BREMER AVE

City WAVERLY State IA Zip Code 50677

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4727

Amount of Each Disbursement this Period

113.86

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. COBBLESTONE INN & SUITES

Mailing Address 208 EAST BREMER AVE

City WAVERLY State IA Zip Code 50677

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4728

Amount of Each Disbursement this Period

102.66

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. CVS

Mailing Address 1 CVS DR

City WOONSOCKET State RI Zip Code 02895

Purpose of Disbursement GIFT CARDS

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 / 2016

Transaction ID : SB21B.I4714

Amount of Each Disbursement this Period

1994.55

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. DOLLAR RENTAL CAR

Mailing Address 5330 E 31ST ST

City TULSA State OK Zip Code 74135

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6222

Amount of Each Disbursement this Period

99.34

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. DOLLAR RENTAL CAR

Mailing Address 5330 E 31ST ST

City TULSA State OK Zip Code 74135

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6223

Amount of Each Disbursement this Period

548.31

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. ECONOLOGGE

Mailing Address 1 CHOICE HOTELS CIR. #400

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6154

Amount of Each Disbursement this Period

974.40

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR.

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement
TRAVEL

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	/	11	/	2016

Transaction ID : SB21B.I6224

Amount of Each Disbursement this Period

331.49

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR.

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement
TRAVEL

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	/	13	/	2016

Transaction ID : SB21B.I6243

Amount of Each Disbursement this Period

279.49

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR.

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement
TRAVEL

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	/	13	/	2016

Transaction ID : SB21B.I6244

Amount of Each Disbursement this Period

-0.10

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

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
0	1			1	9			2	0	1	6		

Transaction ID : SB21B.I4712

Amount of Each Disbursement this Period

4	3	7	.	2	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

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
0	1			1	8			2	0	1	6		

Transaction ID : SB21B.I4713

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I4715

Amount of Each Disbursement this Period

1	9	4	.	6	0
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Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4716

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4717

Amount of Each Disbursement this Period

2	2	2	.	1	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4718

Amount of Each Disbursement this Period

4	5	3	.	6	0
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Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	1			2	0	1	6		

Transaction ID : SB21B.I4721

Amount of Each Disbursement this Period

2	1	6	.	1	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	1			2	0	1	6		

Transaction ID : SB21B.I4722

Amount of Each Disbursement this Period

2	9	0	1	.	9	6
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	2			2	0	1	6		

Transaction ID : SB21B.I4729

Amount of Each Disbursement this Period

1	2	5	.	6	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4730

Amount of Each Disbursement this Period

1	3	1	0	0
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4731

Amount of Each Disbursement this Period

1	2	5	6	0
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I4732

Amount of Each Disbursement this Period

1	3	1	0	0
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

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

0	0	0	0	0
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0	0	0	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4733

Amount of Each Disbursement this Period

238.74

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2016

Transaction ID : SB21B.I4735

Amount of Each Disbursement this Period

410.17

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2016

Transaction ID : SB21B.I4736

Amount of Each Disbursement this Period

482.60

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	5		2	0	1	6		

Transaction ID : SB21B.I4740

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	6		2	0	1	6		

Transaction ID : SB21B.I4746

Amount of Each Disbursement this Period

2	0	9	.	6	0
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	6		2	0	1	6		

Transaction ID : SB21B.I4747

Amount of Each Disbursement this Period

1	8	3	.	1	0
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Memo Item
AMEX FEBURARY 2016

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

0	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	6		2	0	1	6		

Transaction ID : SB21B.I4748

Amount of Each Disbursement this Period

1	8	3	.	1	0
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	6		2	0	1	6		

Transaction ID : SB21B.I4749

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1				2	6		2	0	1	6		

Transaction ID : SB21B.I4750

Amount of Each Disbursement this Period

2	0	9	.	6	0
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Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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0	0	0
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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4751

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4752

Amount of Each Disbursement this Period

2	0	9	.	6	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4753

Amount of Each Disbursement this Period

2	0	9	.	6	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I4754

Amount of Each Disbursement this Period

545.05

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I4755

Amount of Each Disbursement this Period

334.08

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I4756

Amount of Each Disbursement this Period

1273.26

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	6			2	0	1	6		

Transaction ID : SB21B.I4757

Amount of Each Disbursement this Period

1	6	8	4	.	9	8
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	6			2	0	1	6		

Transaction ID : SB21B.I4758

Amount of Each Disbursement this Period

3	6	9	.	5	1
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I4769

Amount of Each Disbursement this Period

5	2	3	.	2	0
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Memo Item
AMEX FEBURARY 2016

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

0	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I4770

Amount of Each Disbursement this Period

-	1	0	3	7	.	6	0
---	---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I4771

Amount of Each Disbursement this Period

1	5	8	8	.	2	6
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
0	1			2	7			2	0	1	6		

Transaction ID : SB21B.I4772

Amount of Each Disbursement this Period

1	0	3	7	.	0	0
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Memo Item
AMEX FEBURARY 2016

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

0	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4773

Amount of Each Disbursement this Period

8	3	.	5	2
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	6

Transaction ID : SB21B.I4778

Amount of Each Disbursement this Period

3	9	.	4	6
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	6

Transaction ID : SB21B.I4779

Amount of Each Disbursement this Period

3	9	.	4	6
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

0	0	0
---	---	---

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

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.I4780

Amount of Each Disbursement this Period

537.40

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I4782

Amount of Each Disbursement this Period

-394.60

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I4783

Amount of Each Disbursement this Period

-394.60

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2016

Transaction ID : SB21B.I4786

Amount of Each Disbursement this Period

-61.87

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2016

Transaction ID : SB21B.I4787

Amount of Each Disbursement this Period

-61.87

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2016

Transaction ID : SB21B.I4788

Amount of Each Disbursement this Period

-61.87

Memo Item
AMEX FEBURARY 2016

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

0.00

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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Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
0	1				3	0		2	0	1	6		

Transaction ID : SB21B.I4789

Amount of Each Disbursement this Period

-	6	1	.	8	7
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
0	1				3	0		2	0	1	6		

Transaction ID : SB21B.I4790

Amount of Each Disbursement this Period

-	6	1	.	8	7
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
0	1				3	0		2	0	1	6		

Transaction ID : SB21B.I4791

Amount of Each Disbursement this Period

-	6	1	.	8	7
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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	/	Y	Y	Y	Y	Y	Y
0	1			3	0		2	0	1	6		

Transaction ID : SB21B.I4792

Amount of Each Disbursement this Period

-	6	1	.	8	7
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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	/	Y	Y	Y	Y	Y	Y
0	1			3	0		2	0	1	6		

Transaction ID : SB21B.I4797

Amount of Each Disbursement this Period

6	9	.	0	9
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Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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	/	Y	Y	Y	Y	Y	Y
0	1			3	0		2	0	1	6		

Transaction ID : SB21B.I4798

Amount of Each Disbursement this Period

4	3	3	.	0	9
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Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4799

Amount of Each Disbursement this Period

468.05

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4800

Amount of Each Disbursement this Period

509.46

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4801

Amount of Each Disbursement this Period

529.42

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4802

Amount of Each Disbursement this Period

399.77

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I4805

Amount of Each Disbursement this Period

83.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I4806

Amount of Each Disbursement this Period

668.65

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.I4807

Amount of Each Disbursement this Period

187.22

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6132

Amount of Each Disbursement this Period

57.51

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6133

Amount of Each Disbursement this Period

57.51

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6134

Amount of Each Disbursement this Period

57.51

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6140

Amount of Each Disbursement this Period

1880.55

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6141

Amount of Each Disbursement this Period

1945.65

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
02	/	03	/	2016

Transaction ID : SB21B.I6155

Amount of Each Disbursement this Period

898.44

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
02	/	03	/	2016

Transaction ID : SB21B.I6156

Amount of Each Disbursement this Period

1404.15

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6166

Amount of Each Disbursement this Period

210.10

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6167

Amount of Each Disbursement this Period

159.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6168

Amount of Each Disbursement this Period

330.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement REFUND - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6169

Amount of Each Disbursement this Period

-586.93

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6170

Amount of Each Disbursement this Period

-57.51

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6171

Amount of Each Disbursement this Period

-586.93

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6172

Amount of Each Disbursement this Period

-57.51

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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		04		2016

Transaction ID : SB21B.I6173

Amount of Each Disbursement this Period

-414.40

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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		04		2016

Transaction ID : SB21B.I6174

Amount of Each Disbursement this Period

-57.51

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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		04		2016

Transaction ID : SB21B.I6175

Amount of Each Disbursement this Period

-529.42

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
REFUND - TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6176

Amount of Each Disbursement this Period

-399.77

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
02	/	04	/	2016

Transaction ID : SB21B.I6177

Amount of Each Disbursement this Period

7.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

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
02	/	06	/	2016

Transaction ID : SB21B.I6186

Amount of Each Disbursement this Period

98.10

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I6187

Amount of Each Disbursement this Period

98.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : SB21B.I6198

Amount of Each Disbursement this Period

444.20

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement REFUND - TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : SB21B.I6199

Amount of Each Disbursement this Period

-284.00

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6210

Amount of Each Disbursement this Period

291.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6211

Amount of Each Disbursement this Period

398.60

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6226

Amount of Each Disbursement this Period

98.09

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6227

Amount of Each Disbursement this Period

99.99

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6228

Amount of Each Disbursement this Period

99.99

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I6248

Amount of Each Disbursement this Period

295.10

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I6250

Amount of Each Disbursement this Period

55.93

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I6255

Amount of Each Disbursement this Period

70.39

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Transaction ID : SB21B.I4741

Amount of Each Disbursement this Period

21.13

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6229

Amount of Each Disbursement this Period

15.18

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
GAS

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 / 2016

Transaction ID : SB21B.I6241

Amount of Each Disbursement this Period

17.29

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6157

Amount of Each Disbursement this Period

637.65

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : **SB21B.I6158**

Amount of Each Disbursement this Period

673.71

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : **SB21B.I6183**

Amount of Each Disbursement this Period

447.99

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : **SB21B.I6188**

Amount of Each Disbursement this Period

113.36

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2016

Transaction ID : **SB21B.I6200**

Amount of Each Disbursement this Period

113.36

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB21B.I6230**

Amount of Each Disbursement this Period

623.48

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB21B.I6231**

Amount of Each Disbursement this Period

420.74

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6232

Amount of Each Disbursement this Period

566.80

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6233

Amount of Each Disbursement this Period

556.90

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN

Mailing Address 10400 FERNWOOD RD

City State Zip Code
BETHESDA MD 20817

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6234

Amount of Each Disbursement this Period

1035.50

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FRONTIER AIR

Mailing Address 7001 TOWER RD

City DENVER State CA Zip Code 80249

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2016

Transaction ID : SB21B.I6245

Amount of Each Disbursement this Period

235.59

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HERTZ

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6142

Amount of Each Disbursement this Period

720.22

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HILTON

Mailing Address 7930 JONES BRANCH DR., SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2016

Transaction ID : SB21B.I6246

Amount of Each Disbursement this Period

107.91

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CAMPAIGN HARDWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6204

Amount of Each Disbursement this Period

398.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CAMPAIGN HARDWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6205

Amount of Each Disbursement this Period

26.94

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOME DEPOT

Mailing Address 2455 PACE FERRY RD NW

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CAMPAIGN HARDWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6206

Amount of Each Disbursement this Period

183.54

Memo Item
AMEX FEBURARY 2016

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

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 N CENTRAL EXPY
STE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.I4734

Amount of Each Disbursement this Period

1256.44

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 N CENTRAL EXPY
STE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I4793

Amount of Each Disbursement this Period

-314.11

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 N CENTRAL EXPY
STE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I4794

Amount of Each Disbursement this Period

-314.11

Memo Item
AMEX FEBURARY 2016

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 N CENTRAL EXPY
STE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
REFUND - TRAVEL

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
0	1			3	0			2	0	1	6		

Transaction ID : SB21B.I4795

Amount of Each Disbursement this Period

-	3	1	4	1	1
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 N CENTRAL EXPY
STE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement
REFUND - TRAVEL

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
0	1			3	0			2	0	1	6		

Transaction ID : SB21B.I4796

Amount of Each Disbursement this Period

-	3	1	4	1	1
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

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
0	1			2	5			2	0	1	6		

Transaction ID : SB21B.I4742

Amount of Each Disbursement this Period

1	3	2	.	1	6
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Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4759

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4760

Amount of Each Disbursement this Period

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

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Transaction ID : SB21B.I4784

Amount of Each Disbursement this Period

4	6	2	.	5	6
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : **SB21B.I6143**

Amount of Each Disbursement this Period

132.16

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : **SB21B.I6144**

Amount of Each Disbursement this Period

132.16

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : **SB21B.I6145**

Amount of Each Disbursement this Period

462.56

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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
02		03		2016

Transaction ID : SB21B.I6159

Amount of Each Disbursement this Period

198.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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
02		03		2016

Transaction ID : SB21B.I6160

Amount of Each Disbursement this Period

198.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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
02		03		2016

Transaction ID : SB21B.I6161

Amount of Each Disbursement this Period

198.24

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I6162

Amount of Each Disbursement this Period

198.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6178

Amount of Each Disbursement this Period

198.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6179

Amount of Each Disbursement this Period

132.16

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6180

Amount of Each Disbursement this Period

396.48

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6181

Amount of Each Disbursement this Period

264.32

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. HOWARD JOHNSON

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I6182

Amount of Each Disbursement this Period

264.32

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 27-01 QUEENS PLAZA NORTH

City State Zip Code
LONG ISLAND NY 11101

Purpose of Disbursement
TRAVEL

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
02	/	03	/	2016

Transaction ID : **SB21B.I6163**

Amount of Each Disbursement this Period

50.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City State Zip Code
IRVING TX 75038

Purpose of Disbursement
TRAVEL

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
02	/	02	/	2016

Transaction ID : **SB21B.I6146**

Amount of Each Disbursement this Period

574.43

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City State Zip Code
IRVING TX 75038

Purpose of Disbursement
TRAVEL

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
02	/	02	/	2016

Transaction ID : **SB21B.I6147**

Amount of Each Disbursement this Period

510.12

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

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	/	02	/	2016

Transaction ID : SB21B.I6148

Amount of Each Disbursement this Period

510.12

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

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	/	09	/	2016

Transaction ID : SB21B.I6207

Amount of Each Disbursement this Period

755.37

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

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	/	09	/	2016

Transaction ID : SB21B.I6208

Amount of Each Disbursement this Period

755.37

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I6209

Amount of Each Disbursement this Period

755.37

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6235

Amount of Each Disbursement this Period

207.10

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. LA QUINTA

Mailing Address 909 HIDDEN RIDGE, SUITE 600

City IRVING State TX Zip Code 75038

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6236

Amount of Each Disbursement this Period

207.10

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
CAMPAIGN HARDWARE

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
0	2			0	8			2	0	1	6		

Transaction ID : SB21B.I6201

Amount of Each Disbursement this Period

3	3	9	6
---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
CAMPAIGN HARDWARE

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
0	2			0	8			2	0	1	6		

Transaction ID : SB21B.I6202

Amount of Each Disbursement this Period

2	2	5	7	6
---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. LOWES

Mailing Address 1000 LOWES BLVD

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement
CAMPAIGN HARDWARE

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
0	2			0	8			2	0	1	6		

Transaction ID : SB21B.I6203

Amount of Each Disbursement this Period

1	8	9	5	8
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Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

0	0	0	0
---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6212

Amount of Each Disbursement this Period

-72.76

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6213

Amount of Each Disbursement this Period

-72.76

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6214

Amount of Each Disbursement this Period

-72.76

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6237

Amount of Each Disbursement this Period

72.76

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6238

Amount of Each Disbursement this Period

72.76

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. MICROTEL INN

Mailing Address 22 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I6239

Amount of Each Disbursement this Period

72.76

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MOTEL 6

Mailing Address 4001 INTERNATIONAL PKWY

City CARROLLTON State TX Zip Code 75007

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4803

Amount of Each Disbursement this Period

604.68

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. PAYLESS CAR RENTAL INC

Mailing Address 2350 N 34TH ST NORTH, SUITE 140

City ST PETERSBURG State FL Zip Code 33713

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6215

Amount of Each Disbursement this Period

28.14

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. PAYLESS CAR RENTAL INC

Mailing Address 2350 N 34TH ST NORTH, SUITE 140

City ST PETERSBURG State FL Zip Code 33713

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6216

Amount of Each Disbursement this Period

28.14

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PAYLESS CAR RENTAL INC

Mailing Address 2350 N 34TH ST NORTH, SUITE 140

City ST PETERSBURG State FL Zip Code 33713

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6217

Amount of Each Disbursement this Period

290.50

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. PAYLESS CAR RENTAL INC

Mailing Address 2350 N 34TH ST NORTH, SUITE 140

City ST PETERSBURG State FL Zip Code 33713

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I6218

Amount of Each Disbursement this Period

250.66

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. PAYLESS CAR RENTAL INC

Mailing Address 2350 N 34TH ST NORTH, SUITE 140

City ST PETERSBURG State FL Zip Code 33713

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2016

Transaction ID : SB21B.I6247

Amount of Each Disbursement this Period

28.14

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PENSKE TRUCK LEASING

Mailing Address ROUTE 10 GREEN HILLS

City READING State PA Zip Code 19603

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I6252

Amount of Each Disbursement this Period

977.24

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. QUALITY INN

Mailing Address 10750 COLUMBIA PIKE

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I6257

Amount of Each Disbursement this Period

1161.28

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. QUALITY INN

Mailing Address 10750 COLUMBIA PIKE

City SILVER SPRING State MD Zip Code 20901

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I6258

Amount of Each Disbursement this Period

1161.28

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RED ROOF INN

Mailing Address RED ROOF BUILDING, 605 SOUTH FRONT

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I6149

Amount of Each Disbursement this Period

-380.64

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. RED ROOF INN

Mailing Address RED ROOF BUILDING, 605 SOUTH FRONT

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement REFUND - TRAVEL

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 / 2016

Transaction ID : SB21B.I6150

Amount of Each Disbursement this Period

-380.64

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. RED ROOF INN

Mailing Address RED ROOF BUILDING, 605 SOUTH FRONT

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I6151

Amount of Each Disbursement this Period

380.64

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RED ROOF INN

Mailing Address RED ROOF BUILDING, 605 SOUTH FRONT

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement TRAVEL

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
0	2			0	2			2	0	1	6		

Transaction ID : SB21B.I6152

Amount of Each Disbursement this Period

3	8	0	.	6	4
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. RENDEZ-VOUS LIMOUSINE LLC

Mailing Address 1425 K ST, STE 350

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement CAR RENTAL

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
0	1			2	9			2	0	1	6		

Transaction ID : SB21B.I4785

Amount of Each Disbursement this Period

1	5	4	.	0	0
---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. RITE AID

Mailing Address 30 HUNTER LN

City CAMP HILL State PA Zip Code 17011

Purpose of Disbursement GIFT CARDS

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
0	1			2	0			2	0	1	6		

Transaction ID : SB21B.I4719

Amount of Each Disbursement this Period

2	6	7	.	4	5	0
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RITE AID

Mailing Address 30 HUNTER LN

City State Zip Code
CAMP HILL PA 17011

Purpose of Disbursement
GIFT CARDS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	6

Transaction ID : SB21B.I4762

Amount of Each Disbursement this Period

1	8	7	4	.	7	5
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. RITE AID

Mailing Address 30 HUNTER LN

City State Zip Code
CAMP HILL PA 17011

Purpose of Disbursement
GIFT CARDS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	6

Transaction ID : SB21B.I4763

Amount of Each Disbursement this Period

1	3	6	4	.	8	5
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. RITE AID

Mailing Address 30 HUNTER LN

City State Zip Code
CAMP HILL PA 17011

Purpose of Disbursement
GIFT CARDS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	6

Transaction ID : SB21B.I4764

Amount of Each Disbursement this Period

2	5	8	4	.	6	5
---	---	---	---	---	---	---

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	0	0
---	---	---

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RITE AID

Mailing Address 30 HUNTER LN

City State Zip Code
CAMP HILL PA 17011

Purpose of Disbursement
GIFT CARDS

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
02	/	02	/	2016

Transaction ID : SB21B.I6153

Amount of Each Disbursement this Period

2229.70

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City State Zip Code
DEER PARK IL 60010

Purpose of Disbursement
ADMINISTRATIVE 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 Y
02	/	06	/	2016

Transaction ID : SB21B.I6189

Amount of Each Disbursement this Period

460.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City State Zip Code
DEER PARK IL 60010

Purpose of Disbursement
ADMINISTRATIVE 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 Y
02	/	06	/	2016

Transaction ID : SB21B.I6190

Amount of Each Disbursement this Period

740.00

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement ADMINISTRATIVE 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
02		06		2016

Transaction ID : SB21B.I6191

Amount of Each Disbursement this Period

212.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement ADMINISTRATIVE 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
02		06		2016

Transaction ID : SB21B.I6192

Amount of Each Disbursement this Period

744.80

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement ADMINISTRATIVE 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
02		06		2016

Transaction ID : SB21B.I6193

Amount of Each Disbursement this Period

648.00

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I6194

Amount of Each Disbursement this Period

816.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I6195

Amount of Each Disbursement this Period

584.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I6196

Amount of Each Disbursement this Period

266.72

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ROBERT HALF INTERNATIONAL

Mailing Address 21925 W FIELD PKWY

City DEER PARK State IL Zip Code 60010

Purpose of Disbursement ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2016

Transaction ID : SB21B.I6197

Amount of Each Disbursement this Period

480.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement GAS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I6184

Amount of Each Disbursement this Period

32.91

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. SPIRIT AIRLINES

Mailing Address 2800 EXECUTIVE WAY

City MIRAMAR State FL Zip Code 33025

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4804

Amount of Each Disbursement this Period

286.18

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I4774

Amount of Each Disbursement this Period

103.36

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I6185

Amount of Each Disbursement this Period

4900.00

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement
TRAVEL

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 / 2016

Transaction ID : SB21B.I4765

Amount of Each Disbursement this Period

65.99

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4766

Amount of Each Disbursement this Period

65.99

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement TRAVEL

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 / 2016

Transaction ID : SB21B.I4767

Amount of Each Disbursement this Period

347.34

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I4775

Amount of Each Disbursement this Period

65.99

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2016

Transaction ID : SB21B.I4776

Amount of Each Disbursement this Period

65.99

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

B. VALUE PLACE HOTEL

Mailing Address 3541 14TH AVE

City COUNCIL BLUFFS State IA Zip Code 51501

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I6135

Amount of Each Disbursement this Period

10.70

Memo Item
AMEX FEBURARY 2016

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 702 SW 8TH ST

City BENTONVILLE6 State AR Zip Code 72716

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I6253

Amount of Each Disbursement this Period

3.03

Memo Item
AMEX FEBURARY 2016

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I5205

Amount of Each Disbursement this Period

1056.31

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement
CC PROCESSING

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 / 2016

Transaction ID : SB21B.I5206

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AT CONFERENCE

Mailing Address P.O. BOX 2939

City SOUTHAMPTON State NY Zip Code 11969

Purpose of Disbursement
PHONE CONFERENCING

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 / 2016

Transaction ID : SB21B.I5224

Amount of Each Disbursement this Period

304.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1370.97

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. BILL.COM

Mailing Address 1810 EMBARCADERO RD

City PALO ALTO State CA Zip Code 94303

Purpose of Disbursement
ACCOUNTS PAYABLE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5237

Amount of Each Disbursement this Period

94.36

Memo Item

Full Name (Last, First, Middle Initial)

B. BLUEPRINT FUSION, LLC

Mailing Address 205 LAKE AVE

City TRUMBULL State CT Zip Code 06611

Purpose of Disbursement
IT CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5240

Amount of Each Disbursement this Period

6600.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAESARIOS

Mailing Address 1057 ELM ST

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5245

Amount of Each Disbursement this Period

62.65

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6757.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.I5246

Amount of Each Disbursement this Period

67.23

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING 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 / 29 / 2016

Transaction ID : SB21B.I5247

Amount of Each Disbursement this Period

242.10

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.I5248

Amount of Each Disbursement this Period

478.37

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

787.70

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
REV SHARES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.I5249

Amount of Each Disbursement this Period

726.30

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5256

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5257

Amount of Each Disbursement this Period

20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

766.30

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

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 / 2016

Transaction ID : SB21B.I5258

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

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 / 2016

Transaction ID : SB21B.I5259

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5260

Amount of Each Disbursement this Period

20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

60.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5261

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5262

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RDSTE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5277

Amount of Each Disbursement this Period

2570.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2605.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5278

Amount of Each Disbursement this Period

231.28

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5279

Amount of Each Disbursement this Period

2833.50

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

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 / 2016

Transaction ID : SB21B.I5280

Amount of Each Disbursement this Period

25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3089.78

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5281

Amount of Each Disbursement this Period

112.35

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
CC PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5283

Amount of Each Disbursement this Period

8.72

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMONWEALTH CONSULTING

Mailing Address 9771 W 71ST AVE

City ARVADA State CO Zip Code 80004

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5286

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2621.07

**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)

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. COMMONWEALTH CONSULTING

Mailing Address 9771 W 71ST AVE

City ARVADA State CO Zip Code 80004

Purpose of Disbursement
FUNDRAISING CONSULTING

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
02 / 16 / 2016

Transaction ID : SB21B.I6289

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR LLC

Mailing Address 435 E MAIN ST STE 250
STE 250

City GREENWOOD State IN Zip Code 46143

Purpose of Disbursement
REVENUE SHARE

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
02 / 19 / 2016

Transaction ID : SB21B.I5287

Amount of Each Disbursement this Period

360.70

Memo Item

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE CONNECTOR LLC

Mailing Address 435 E MAIN ST STE 250
STE 250

City GREENWOOD State IN Zip Code 46143

Purpose of Disbursement
REVENUE SHARE

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
02 / 19 / 2016

Transaction ID : SB21B.I5288

Amount of Each Disbursement this Period

3076.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5936.96

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. CREATIVE RESPONSE CONCEPTS

Mailing Address 2760 EISENHOWER AVE FL 4

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PUBLIC RELATIONS CONSULTING; CONSULTANT EXPENSES

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 / 2016

Transaction ID : SB21B.I5291

Amount of Each Disbursement this Period

29268.19

Memo Item

Full Name (Last, First, Middle Initial)

B. CREATIVE RESPONSE CONCEPTS

Mailing Address 2760 EISENHOWER AVE FL 4

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PUBLIC RELATIONS CONSULTING; CONSULTANT EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5292

Amount of Each Disbursement this Period

17232.28

Memo Item

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 130 ROYALL ST

City CANTON State MA Zip Code 02021

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5315

Amount of Each Disbursement this Period

4.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

46505.15

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ELECTION CFO, LLC

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement COMPLIANCE CONSULTING; EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I5319

Amount of Each Disbursement this Period

4448.48

Memo Item

Full Name (Last, First, Middle Initial)

B. ERIK SODERSTROM, LLC

Mailing Address 101 GATEWAY CT
APT 406

City CHESAPEAKE State VA Zip Code 23320

Purpose of Disbursement MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5326

Amount of Each Disbursement this Period

470.95

Memo Item

Full Name (Last, First, Middle Initial)

C. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I5328

Amount of Each Disbursement this Period

107.91

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5027.34

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. EXPEDIA INC

Mailing Address 333 108TH AVE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5329

Amount of Each Disbursement this Period

227.86

Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : SB21B.I5330

Amount of Each Disbursement this Period

73.95

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5331

Amount of Each Disbursement this Period

109.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

411.01

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : SB21B.I5332

Amount of Each Disbursement this Period

0.76

Memo Item

Full Name (Last, First, Middle Initial)

B. GAGE GROUP, LLC

Mailing Address 66 CANAL CENTER PLZSTE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement EVENT LOGISTICS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5333

Amount of Each Disbursement this Period

1646.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - ONLINE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5339

Amount of Each Disbursement this Period

791.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2438.66

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. GRASSHOPPER

Mailing Address 197 1ST AVE, SUITE 200

City NEEDHAM State MA Zip Code 02494

Purpose of Disbursement PHONES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : SB21B.I5340

Amount of Each Disbursement this Period

100.02

Memo Item

Full Name (Last, First, Middle Initial)

B. HEARTLAND CAMPAIGN MANAGEMENT

Mailing Address 10312 S 177TH ST

City OMAHA State NE Zip Code 68136

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5341

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HILTON

Mailing Address 7930 JONES BRANCH DR., SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5343

Amount of Each Disbursement this Period

10.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

310.22

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. HILTON

Mailing Address 7930 JONES BRANCH DR., SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I5344

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LEXIS NEXIS

Mailing Address PO BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
RESEARCH SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I5418

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MEATH MEDIA GROUP

Mailing Address C/O JASON MEATH4441 KLINGLE ST NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I5447

Amount of Each Disbursement this Period

Memo Item

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. MEATH MEDIA GROUP

Mailing Address C/O JASON MEATH4441 KLINGLE ST NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5448

Amount of Each Disbursement this Period

16425.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MIDAMERICAN ENERGY

Mailing Address P.O. BOX 8020

City DAVENPORT State IA Zip Code 52808

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5457

Amount of Each Disbursement this Period

162.82

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW ENGLAND DUPLICATOR

Mailing Address 8030 S WILLOW ST

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5477

Amount of Each Disbursement this Period

887.01

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17474.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. OUT LOUD STRATEGIES, INC.

Mailing Address 10291 NW 39TH CT

City State Zip Code
CORAL SPRINGS FL 33065

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5481

Amount of Each Disbursement this Period

6200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. OUTBRAIN, INC.

Mailing Address 39 WEST 13TH FLOOR3RD FLOOR

City State Zip Code
NEW YORK NY 10011

Purpose of Disbursement
WEBSITE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5482

Amount of Each Disbursement this Period

2631.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PLATINUM CIRCLE TECHNOLOGIES

Mailing Address P.O. BOX 4141

City State Zip Code
ALPHARETTA GA 30023

Purpose of Disbursement
IT CONSULTING

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 / 2016

Transaction ID : SB21B.I5498

Amount of Each Disbursement this Period

4500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

13331.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PLATINUM CIRCLE TECHNOLOGIES

Mailing Address P.O. BOX 4141

City ALPHARETTA State GA Zip Code 30023

Purpose of Disbursement
IT 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 Y
02	/	18	/	2016

Transaction ID : SB21B.I5499

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PREMIUM BEAT

Mailing Address 4398 ST. LAURENT BLVD
STE 103

City MONTREAL State QC Zip Code H2W1Z

Purpose of Disbursement
WEBSITE EXPENSE

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	/	01	/	2016

Transaction ID : SB21B.I5501

Amount of Each Disbursement this Period

59.95

Memo Item

Full Name (Last, First, Middle Initial)

C. PREMIUM BEAT

Mailing Address 4398 ST. LAURENT BLVD
STE 103

City MONTREAL State QC Zip Code H2W1Z

Purpose of Disbursement
WEBSITE EXPENSE

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	/	2016

Transaction ID : SB21B.I5502

Amount of Each Disbursement this Period

59.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1619.90

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. PREMIUM BEAT

Mailing Address 4398 ST. LAURENT BLVD
STE 103

City MONTREAL State QC Zip Code H2W1Z

Purpose of Disbursement
WEBSITE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5503

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PRESENCE PUBLIC RELATIONS

Mailing Address 3329 FAINT RIDGE

City PIEDMONT State OK Zip Code 73078

Purpose of Disbursement
PUBLIC RELATIONS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5504

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PURLEM

Mailing Address 2 N LASALLE ST FL 14

City CHICAGO State IL Zip Code 60602

Purpose of Disbursement
WEBSITE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5505

Amount of Each Disbursement this Period

Memo Item

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RED D

Mailing Address ATTN: JANEL DOMENICOP.O. BOX 1247

City DENVER State CO Zip Code 80212

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5508

Amount of Each Disbursement this Period

12500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RED D

Mailing Address ATTN: JANEL DOMENICOP.O. BOX 1247

City DENVER State CO Zip Code 80212

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5509

Amount of Each Disbursement this Period

12500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RIGHT STRATEGIES, LLC

Mailing Address 3176 SUMMIT SQUARE DR STE B-10

City OAKTON State VA Zip Code 22124

Purpose of Disbursement
IT CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5512

Amount of Each Disbursement this Period

13000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

38000.00

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. RIGHT WAY MARKETING

Mailing Address 139 POLO DRIVE

City BLOUNTVILLE State TN Zip Code 37617

Purpose of Disbursement
TELEPHONE VOTER OUTREACH

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5513

Amount of Each Disbursement this Period

45144.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RIGHT WAY MARKETING

Mailing Address 139 POLO DRIVE

City BLOUNTVILLE State TN Zip Code 37617

Purpose of Disbursement
TELEPHONE VOTER OUTREACH

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5514

Amount of Each Disbursement this Period

11259.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SEPTEMBER GROUP, LLC

Mailing Address 1712 PIONEER AVESUITE 115

City CHEYENNE State WY Zip Code 82001

Purpose of Disbursement
GRASSROOTS CONSULTING & EXPENSES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.I5543

Amount of Each Disbursement this Period

100563.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

156966.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SEPTEMBER GROUP, LLC

Mailing Address 1712 PIONEER AVESUITE 115

City CHEYENNE State WY Zip Code 82001

Purpose of Disbursement
GRASSROOTS CONSULTANT EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5544

Amount of Each Disbursement this Period

14942.02

Memo Item

Full Name (Last, First, Middle Initial)

B. SEPTEMBER GROUP, LLC

Mailing Address 1712 PIONEER AVESUITE 115

City CHEYENNE State WY Zip Code 82001

Purpose of Disbursement
GRASSROOTS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5545

Amount of Each Disbursement this Period

83694.36

Memo Item

Full Name (Last, First, Middle Initial)

C. SLYBROADCASTING

Mailing Address 7 FANEUIL HALL

City BOSTON State MA Zip Code 02109

Purpose of Disbursement
ADVERTISING

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 / 2016

Transaction ID : SB21B.I5552

Amount of Each Disbursement this Period

400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

99036.38

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SLYBROADCASTING

Mailing Address 7 FANEUIL HALL

City BOSTON State MA Zip Code 02109

Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5553

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SOFTWARE MANAGEMENT COMPANY, INC

Mailing Address 500 N BRAND BLVD, SUITE 1100

City GLENDALE State CA Zip Code 91203

Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2016

Transaction ID : SB21B.I5554

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
PRINTING

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 / 2016

Transaction ID : SB21B.I5556

Amount of Each Disbursement this Period

25.13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

295.13

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED
STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
PRINTING

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
02	/	02	/	2016

Transaction ID : SB21B.I5557

Amount of Each Disbursement this Period

295.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED
STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
PRINTING

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
02	/	02	/	2016

Transaction ID : SB21B.I5558

Amount of Each Disbursement this Period

390.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED
STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
PRINTING

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
02	/	02	/	2016

Transaction ID : SB21B.I5559

Amount of Each Disbursement this Period

450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1135.00

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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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED
STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I6288

Amount of Each Disbursement this Period

22185.61

Memo Item

Full Name (Last, First, Middle Initial)

B. SPECTRUM MARKETING COMPANIES

Mailing Address SPECTRUM MARKETING COMPANIES95 ED
STE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I7285

Amount of Each Disbursement this Period

308.85

Memo Item

Full Name (Last, First, Middle Initial)

C. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5569

Amount of Each Disbursement this Period

304.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

22799.40

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5570

Amount of Each Disbursement this Period

1069.15

Memo Item

Full Name (Last, First, Middle Initial)

B. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : SB21B.I5571

Amount of Each Disbursement this Period

27801.67

Memo Item

Full Name (Last, First, Middle Initial)

C. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

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 / 2016

Transaction ID : SB21B.I5572

Amount of Each Disbursement this Period

185.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

29055.85

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

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 / 2016

Transaction ID : SB21B.I5573

Amount of Each Disbursement this Period

361.70

Memo Item

Full Name (Last, First, Middle Initial)

B. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2016

Transaction ID : SB21B.I5574

Amount of Each Disbursement this Period

1125.18

Memo Item

Full Name (Last, First, Middle Initial)

C. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : SB21B.I5575

Amount of Each Disbursement this Period

185.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1672.61

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5576

Amount of Each Disbursement this Period

9.26

Memo Item

Full Name (Last, First, Middle Initial)

B. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2016

Transaction ID : SB21B.I5577

Amount of Each Disbursement this Period

32507.58

Memo Item

Full Name (Last, First, Middle Initial)

C. SURGE

Mailing Address 920 CANDIA RD

City MANCHESTER State NH Zip Code 03109

Purpose of Disbursement
PAYROLL TAXES & EXPENSES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2016

Transaction ID : SB21B.I5578

Amount of Each Disbursement this Period

770.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

33287.10

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. SWIFTKURRENT

Mailing Address 83 CABOT ST

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5581

Amount of Each Disbursement this Period

25681.89

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY, LLC

Mailing Address 1033 N FAIRFAX ST STE 40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
REV SHARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5582

Amount of Each Disbursement this Period

62.08

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLC

Mailing Address 1033 N FAIRFAX ST STE 40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5583

Amount of Each Disbursement this Period

190.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25934.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. THE E. H. MURRAY GROUP, LLC

Mailing Address 1214 A INGLESIDE AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
FUNDRAISING CONSULTING

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 / 2016

Transaction ID : SB21B.I5588

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. THE E. H. MURRAY GROUP, LLC

Mailing Address 1214 A INGLESIDE AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5589

Amount of Each Disbursement this Period

15700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE GEORGIAN CLUB

Mailing Address 100 GALLERIA PKWYSTE 1700

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5590

Amount of Each Disbursement this Period

2674.04

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

28374.04

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TRACE STRATEGIES, LLC

Mailing Address 411 S VICTORY202

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.I5601

Amount of Each Disbursement this Period

21100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TRACE STRATEGIES, LLC

Mailing Address 411 S VICTORY202

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement
STRATEGIC CONSULTANT EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.I5602

Amount of Each Disbursement this Period

1825.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TVEYES INC.

Mailing Address TVEYES INC.2150 POST ROAD

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement
MEDIA MONITORING

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 / 2016

Transaction ID : SB21B.I5605

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

23425.00

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

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 / 2016

Transaction ID : SB21B.I5606

Amount of Each Disbursement this Period

90.07

Memo Item

Full Name (Last, First, Middle Initial)

B. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

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 / 2016

Transaction ID : SB21B.I5607

Amount of Each Disbursement this Period

90.08

Memo Item

Full Name (Last, First, Middle Initial)

C. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

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 / 2016

Transaction ID : SB21B.I5608

Amount of Each Disbursement this Period

90.22

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

270.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : SB21B.I5609

Amount of Each Disbursement this Period

90.20

Memo Item

Full Name (Last, First, Middle Initial)

B. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5610

Amount of Each Disbursement this Period

70.01

Memo Item

Full Name (Last, First, Middle Initial)

C. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5611

Amount of Each Disbursement this Period

70.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

230.27

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5612

Amount of Each Disbursement this Period

70.11

Memo Item

Full Name (Last, First, Middle Initial)

B. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.I5613

Amount of Each Disbursement this Period

70.11

Memo Item

Full Name (Last, First, Middle Initial)

C. TWILIO

Mailing Address 645 HARRISON ST FL 3

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.I5614

Amount of Each Disbursement this Period

70.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

210.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5617

Amount of Each Disbursement this Period

5.40

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5618

Amount of Each Disbursement this Period

6.21

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5619

Amount of Each Disbursement this Period

6.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

18.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5620

Amount of Each Disbursement this Period

7.42

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5621

Amount of Each Disbursement this Period

9.04

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5622

Amount of Each Disbursement this Period

9.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26.22

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5623

Amount of Each Disbursement this Period

10.19

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5624

Amount of Each Disbursement this Period

10.36

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5625

Amount of Each Disbursement this Period

11.46

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

32.01

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5626

Amount of Each Disbursement this Period

14.14

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5627

Amount of Each Disbursement this Period

14.96

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I5628

Amount of Each Disbursement this Period

16.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.30

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5629

Amount of Each Disbursement this Period

6.21

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5630

Amount of Each Disbursement this Period

11.06

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB21B.I5631

Amount of Each Disbursement this Period

14.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31.48

**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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST
FL 4

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5632

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. VONAGE

Mailing Address 23 MAIN ST

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement
PHONES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5635

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. VONAGE

Mailing Address 23 MAIN ST

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement
PHONES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I5636

Amount of Each Disbursement this Period

Memo Item

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)

CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

Full Name (Last, First, Middle Initial)

A. ZENDESK

Mailing Address 989 MARKET ST STE 300

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
WEBSITE EXPENSE

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
02 / 08 / 2016

Transaction ID : SB21B.I5650

Amount of Each Disbursement this Period

345.00

Memo Item

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

345.00

1174413.34

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ C C00573154
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee AMHERST CITIZEN <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address 16 PINE ACRES RD	Amount 364.50
City State Zip Code AMHERST NH 03031	Transaction ID : SE24.3979 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee BEDFORD JOURNAL <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address 54 SCHOOL ST	Amount 192.75
City State Zip Code MILFORD NH 03055	Transaction ID : SE24.3970 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	557.25
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON

Signature _____ Date M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00573154 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item BERLIN DAILY SUN	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 04 / 2016 </div>
Mailing Address 164 MAIN ST #1	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 460.00 </div>
City BERLIN State NH Zip Code 03570	Transaction ID : SE24.3964 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type 	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 1112020.11 	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item CALEDONIAN RECORD	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 04 / 2016 </div>
Mailing Address P.O. BOX 8	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 283.50 </div>
City ST. JOHNSBURY State VT Zip Code 05819	Transaction ID : SE24.3975 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type 	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 1112020.11 	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 743.50 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON
[Electronically Filed]
Date
MM / DD / YYYY
02 / 02 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item COLEBROOK CHRONICLE	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address P.O. BOX 263	Amount 251.00
City State Zip Code COLEBROOK NH 03576	Transaction ID : SE24.3974 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item CONWAY DAILY SUN	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address P.O. BOX 1940	Amount 460.00
City State Zip Code NORTH CONWAY NH 03680	Transaction ID : SE24.3963 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	711.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item EAGLE TIMES	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 02 / 04 / 2016 </div>
Mailing Address P.O. BOX 888	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M 497.33 </div>
City State Zip Code CLAREMONT NH 03743	Transaction ID : SE24.3972 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT	Category/Type <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M 1112020.11 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item HOLLIS BROOKLINE JOURNAL	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 02 / 04 / 2016 </div>
Mailing Address 54 SCHOOL ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M 138.00 </div>
City State Zip Code MILFORD NH 03055	Transaction ID : SE24.3969 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT	Category/Type <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M 1112020.11 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M 635.33 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M M M </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON
[Electronically Filed]
Date

M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item HUDSON LITCHFIELD NEWS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 02 / 04 / 2016 </div>
Mailing Address 17 EXECUTIVE DR. STE 1	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 436.00 </div>
City HUDSON State NH Zip Code 03051	Transaction ID : SE24.3966 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item JOURNAL OPINION	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 02 / 04 / 2016 </div>
Mailing Address P.O. BOX 378	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 245.00 </div>
City BRADFORD State VT Zip Code 05033	Transaction ID : SE24.3959 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 681.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON
[Electronically Filed]
Date
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00573154
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: LACONIA CITIZEN
Mailing Address: 171 FAIR ST
City: LACONIA, State: NH, Zip Code: 03246
Purpose of Expenditure: ADVERTISING - PRINT
Date of Public Distribution/Dissemination: 02/04/2016
Amount: 384.30
Transaction ID: SE24.3973
Date of Disbursement or Obligation: 02/26/2016
Name of Federal Candidate: CARLY FIORINA
Support: [X]
Office Sought: [X] President, State: NH
Disbursement For: [X] Primary

Full Name of Payee: LACONIA DAILY SUN
Mailing Address: 1127 UNION AVE #1
City: LACONIA, State: NH, Zip Code: 03246
Purpose of Expenditure: ADVERTISING - PRINT
Date of Public Distribution/Dissemination: 02/04/2016
Amount: 460.00
Transaction ID: SE24.3962
Date of Disbursement or Obligation: 02/26/2016
Name of Federal Candidate: CARLY FIORINA
Support: [X]
Office Sought: [X] President, State: NH
Disbursement For: [X] Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 844.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON
[Electronically Filed]
Date: 02/02/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ C C00573154
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Check if 24-hour report 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y

Full Name of Payee LEDGER TRANSCRIPT <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address P.O. BOX 36	Amount 332.88
City State Zip Code PETERBOROUGH NH 03458	
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate CARLY FIORINA	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE24.3971

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2016

Full Name of Payee LITTLETON RECORD <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 04 / 2016
Mailing Address P.O. BOX 8	Amount 270.60
City State Zip Code ST. JOHNSBURY VT 05819	
Purpose of Expenditure ADVERTISING - PRINT	Category/Type
Name of Federal Candidate CARLY FIORINA	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE24.3976

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	603.48
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
02 / 02 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item MERRIMACK JOURNAL	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 54 SCHOOL ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 192.75 </div>
City MILFORD State NH Zip Code 03055	Transaction ID : SE24.3968 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item NEWS & SENTINEL	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 6 BRIDGE ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 242.50 </div>
City COLEBROOK State NH Zip Code 03576	Transaction ID : SE24.3960 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 435.25 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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CHRIS MARSTON
[Electronically Filed]
Date 02 / 02 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item NORTH WOODS WEEKLY	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 6 BRIDGE ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">242.50</div>
City COLEBROOK State NH Zip Code 03576	Transaction ID : SE24.3961 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 01 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1112020.11</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item NUTFIELD PUBLISHING LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 2 LITTLEFIELD RD	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">496.53</div>
City LONDONDERRY State NH Zip Code 03053	Transaction ID : SE24.3958 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1112020.11</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">739.03</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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CHRIS MARSTON
 Signature

[Electronically Filed] Date 02 / 02 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item SALMON PRESS PAPERS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 5 WATER ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 3028.50 </div>
City MEREDITH State NH Zip Code 03253	Transaction ID : SE24.3980 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item SEACOAST MEDIA GROUP	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 02 / 04 / 2016 </div>
Mailing Address 111 NEW HAMPSHIRE AVE	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1372.06 </div>
City PORTSMOUTH State NH Zip Code 03801	Transaction ID : SE24.3977 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1112020.11 </div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 4400.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CHRIS MARSTON

Signature _____ [Electronically Filed] Date 02 / 02 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ C C00573154
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee SPECTRUM MARKETING COMPANIES <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 02 / 2016
Mailing Address SPECTRUM MARKETING COMPANIES95 ED STE 101	Amount 18610.00
City State Zip Code MANCHESTER NH 03102	Transaction ID : SE24.3955 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 01 / 2016
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type
Name of Federal Candidate CARLY FIORINA	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee SPECTRUM MARKETING COMPANIES <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016
Mailing Address SPECTRUM MARKETING COMPANIES95 ED STE 101	Amount 14289.04
City State Zip Code MANCHESTER NH 03102	Transaction ID : SE24.3956 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 02 / 2016
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type
Name of Federal Candidate CARLY FIORINA	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	32899.04
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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CHRIS MARSTON [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA

FEC IDENTIFICATION NUMBER
C C00573154

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Memo Item
SPECTRUM MARKETING COMPANIES

Mailing Address **SPECTRUM MARKETING COMPANIES95 ED STE 101**

City **MANCHESTER** State **NH** Zip Code **03102**

Purpose of Expenditure **ADVERTISING - PRINT DESIGN** Category/Type

Name of Federal Candidate **CARLY FIORINA** Support Oppose

Office Sought: House President Senate State: **NH** District: _____

Calendar Year-To-Date Per Election for Office Sought **1112020.11**

Disbursement For: Primary General Other (specify) ▶ _____

Date of Public Distribution/Dissemination / / **02 / 04 / 2016**

Amount **500.00**

Transaction ID : **SE24.3957**

Date of Disbursement or Obligation / / **02 / 01 / 2016**

Full Name of Payee Memo Item
SUNCOOK VALLEY SUN

Mailing Address **8 BROADWAY**

City **PITTSFIELD** State **NH** Zip Code **03263**

Purpose of Expenditure **ADVERTISING - PRINT** Category/Type

Name of Federal Candidate **CARLY FIORINA** Support Oppose

Office Sought: House President Senate State: **NH** District: _____

Calendar Year-To-Date Per Election for Office Sought **1112020.11**

Disbursement For: Primary General Other (specify) ▶ _____

Date of Public Distribution/Dissemination / / **02 / 04 / 2016**

Amount **286.60**

Transaction ID : **SE24.3981**

Date of Disbursement or Obligation / / **02 / 26 / 2016**

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ▶ **786.60**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures..... ▶

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CHRIS MARSTON [Electronically Filed] Date / / **02 / 02 / 2016**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573154 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item THE BRIDGE WEEKLY	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 50 SMITH ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 475.00 </div>
City WOODSVILLE State NH Zip Code 03785	Transaction ID : SE24.3978 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type 	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item THE CABINET	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 54 SCHOOL ST	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 467.77 </div>
City MILFORD State NH Zip Code 03055	Transaction ID : SE24.3967 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure ADVERTISING - PRINT Category/Type 	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Name of Federal Candidate CARLY FIORINA <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1112020.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 942.77 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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CHRIS MARSTON

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CONSERVATIVE, AUTHENTIC, RESPONSIVE LEADERSHIP FOR YOU AND FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00573154 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <input type="checkbox"/> Memo Item WINDHAM INDEPENDENT NEWS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 02 / 04 / 2016 </div>
Mailing Address 233 RANGE RD	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 199.00 </div>
City State Zip Code WINDHAM NH 03087	Transaction ID : SE24.3965 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 </div>
Purpose of Expenditure ADVERTISING - PRINT	Category/Type <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CARLY FIORINA	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 1112020.11 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
City State Zip Code	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure	Category/Type <div style="border: 1px solid black; width: 40px; height: 15px;"></div>
Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 199.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 45178.11 </div>

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CHRIS MARSTON
 Signature

[Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016