PAGE 1 / 14

Image# 201602269009628364

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An Aut	horized Committee	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
WILLIS NORTH AMER	ICA INC POLITICAL	_ ACTION COMMITT	EE	
		1 1 1 1 1 1 1 1 1 1		
ADDRESS (number and street)	7 HANOVER SQUARE			
Check if different than previously reported. (ACC)	NEW YORK		NY 100	004
2. FEC IDENTIFICATION NU	MBER ▼ CIT	ΓY ▲	STATE A	ZIP CODE ▲
C C00418731		S THIS NEW (N)	OR × AMENDE	ED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q: July 15 Quarterly Report (Q: October 15 Quarterly Report (Q: X January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: Mar Apr (c) 12-Day PRE-Election Report for the: (d) 30-Day	General (30G)	(M6) Sep 20 (Ms	9) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period 07	01 2015	through 1	2 31	2015
I certify that I have examined thit Type or Print Name of Treasurer	•	my knowledge and belief it	is true, correct and comp	plete.
Signature of Treasurer Rob E	den	[Electronically Filed]		18 2016
NOTE: Submission of false, errone Office	ous, or incomplete information	n may subject the person sign		
Use			FE	EC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

01 2015 2015 Report Covering the Period: 07 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33574.56 January 1, 2015 (b) Cash on Hand at 29223.97 Beginning of Reporting Period..... 3573.75 3573.75 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 37148.31 32797.72 6(a) and 6(c) for Column B)..... 3561.76 7912.35 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 29235.96 29235.96 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

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)	3040.00	3040.00
(ii) Unitemized(iii) TOTAL (add	323.75	323.75
Lines 11(a)(i) and (ii)	3363.75	3363.75
(b) Political Party Committees	0	0
(such as PACs)(d) Total Contributions (add Lines	0	0
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3363.75	3363.75
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	210.00	210.00
to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account		
(from Schedule H3)	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	3573.75	3573.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	3573.75	3573.75

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)		Caronaa Tour to Sale
	(i) Federal Share	0	0
	(ii) Non-Federal Share	0	0
((b) Other Federal Operating		
	Expenditures	791.76	1642.35
(c) Total Operating Expenditures	791.76	1642.35
22.	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	791.70	1042.50
(Committees	0	0
F	Contributions to Federal Candidates/Committees	1000.00	4500.00
	and Other Political Committeesndependent Expenditures	1000.00	4300.00
(use Schedule E)	0	0
25. (Coordinated Party Expenditures '2 U.S.C. §441a(d))		
(use Schedule F)	0	0
6. I	_oan Repayments Made	0	0
7. L	oans Made Refunds of Contributions To:	0	0
	a) Individuals/Persons Other Than Political Committees	1770.00	1770.00
	man i onicai committees		
(b) Political Party Committees	0	0
(c) Other Political Committees	0	0
	(such as PACs)		
(d) Total Contribution Refunds	4770.00	
	(add Lines 28(a), (b), and (c))▶	1770.00	1770.00
9. (Other Disbursements	0	0
	l de la companya de		
	Federal Election Activity (2 U.S.C. §431(20))		
((a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0	0
	(") W W O	0	0
1	(ii) "Levin" Shareb) Federal Election Activity Paid Entirely		
(With Federal Funds	0	0
(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0
1.]	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3561.76	7912.35
	5.1.5.1.18.1		7
	Total Federal Disbursements subtract Line 21(a)(ii) and Line 30(a)(ii)		
	rom Line 31)	3561.76	7912.35

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3363.75	3363.75
4. Total Contribution Refunds (from Line 28(d))	1770.00	1770.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1593.75	1593.75
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	791.76	1642.35
7. Offsets to Operating Expenditures (from Line 15, page 3)	210.00	210.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	581.76	1432.35

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:			PAGE		6	OF		14		
(che	(check only one)									
×	11a		11b		11c		12	2		
	13		14		15		16	6		17

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

<u> </u>	To commercial purposes, enter than doing the	Traine and address of any political committee to	Concil Containations from Caon Continuitor.
\rangle		POLITICAL ACTION COMMITTE	Έ
۵.	Full Name (Last, First, Middle Initial) Ronald L Alexander Mailing Address 1604 Bingham Dr	Date of Receipt	
	City Knoxville	State Zip Code TN 37922-8066	12 31 2015 Transaction ID: 441-P4147 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	499.92 Memo Item
	Name of Employer Willis of Tennessee, Inc. Receipt For:	Occupation Managing Partner Aggregate Year-to-Date ▼	Payroll Deduction
	Primary General Other (specify) ▼	499.92	(\$20.83 Semi-Monthly)
3.	Full Name (Last, First, Middle Initial) Deneen M Huber Mailing Address 3607 Northridge Dr		Date of Receipt
	City Allison Park	State Zip Code PA 15101-5003	12 31 2015 Transaction ID : 441-P4148 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.08
,	Name of Employer Willis Americas Administration, Inc.	Occupation Senior Resource Consultant	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.08	(\$41.67 Semi-Monthly)
C.	Full Name (Last, First, Middle Initial) Todd J. Jones		Date of Receipt
	Mailing Address 637 Goose Neck Dr		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lititz	State Zip Code PA 17543-8368	Transaction ID : 441-P4149 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	499.92
	Name of Employer Willis North America, Inc.	Occupation President WNA	Memo Item Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.92	(\$20.83 Semi-Monthly)
SI	UBTOTAL of Receipts This Page (optional)	>	1999.92
т	OTAL This Period (last page this line number o	nly)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:			PAGE		7	OF		14		
(che	(check only one)									
X	11a		11b		11c		12	2		
	13		14		15		16	3		17

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

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.		
\rangle	NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC	POLITICAL ACTION COMMITTE	E		
١.	Full Name (Last, First, Middle Initial) Jay M. Kirschbaum		Date of Receipt		
	Mailing Address 1520 Woodroyal East Dr	12 31 2015			
	City	State Zip Code	Transaction ID: 441-P4150		
	Chesterfield	MO 63017-5550	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	1000.08 Memo Item		
	Name of Employer	Occupation	Payroll Deduction		
	Willis Americas Administration, Inc.	Consulting Director	1 dyron beddonon		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.08	(\$41.67 Semi-Monthly)		
3.	Full Name (Last, First, Middle Initial) Gary M Windt		Date of Receipt		
	Mailing Address 707 S School St		12 31 2015		
	City	State Zip Code	Transaction ID: 441-P4151		
	Lombard	IL 60148-3620	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	40.00		
	Name of Employer	Occupation	Memo Item		
	Willis of Minnesota, Inc.	Strategic Mkt Operating Officer	Payroll Deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	(\$10.00 Semi-Monthly)		
<u> </u>	Full Name (Last, First, Middle Initial)		Date of Receipt		
	Mailing Address		M = M / D = D / Y = Y = Y		
	City	State Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			
	Name of Employer	Occupation	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
s	UBTOTAL of Receipts This Page (optional)	·····	1040.08		
T	OTAL This Period (last page this line number o	nly)	3040.00		

S

ım	age# 201602269009628371				
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 14 (check only one) 11a 11b 11c 12 13 14 X 15 16 17	
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC				
Α.	Full Name (Last, First, Middle Initial) SunTrust Bank of Nashville				
	Mailing Address P.O. Box 305110			08 04 2015	
	City Nashville	State TN	Zip Code 37230	Transaction ID : 452	
	FEC ID number of contributing federal political committee. Name of Employer	C		Amount of Each Receipt this Period 210.00 Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	refund	
 В.	Full Name (Last, First, Middle Initial)	Date of Receipt			
	Mailing Address City	M = M / D = D / Y = Y = Y			
	FEC ID number of contributing federal political committee. Name of Employer	Occupation		Amount of Each Receipt this Period Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼		
С .	Full Name (Last, First, Middle Initial)			Date of Receipt	
	Mailing Address	M = M / D = D / Y = Y = Y			
	City	State	Zip Code	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Feriod	
	Name of Employer	Occupation	1	Memo Item	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		

Other (specify)

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

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

210.00

210.00

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	1b 22 23 24 25 26
Any information copied from such Reports and Stater or for commercial purposes, other than using the name of the name of the state of t	ne and address of any political committee	e to solicit contributions from such committee.
A. SunTrust Bank of Nashville Mailing Address P.O. Box 305110		Date of Disbursement 07
Nashville Purpose of Disbursement Account Analysis Fee Candidate Name Office Sought: House Disburser		Amount of Each Disbursement this Period 170.83 Memo Item
State: District: Full Name (Last, First, Middle Initial) B. SunTrust Bank of Nashville Mailing Address P.O. Box 305110	Primary General Other (specify) ▼	Date of Disbursement 08 20 2015
	State Zip Code TN 37230 001 Category/ Type nent For: Primary General Other (specify) Other (specify)	Transaction ID : 412 Amount of Each Disbursement this Period 123.65 Memo Item
Nashville Purpose of Disbursement Account Analysis Fee Candidate Name	State Zip Code TN 37230 001 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)	Lloo conorata askasilistata	FOR LINE NUMBER: PAGE 10 OF 14				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 2 28c 29 3		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PC	•			om such committee.		
Full Name (Last, First, Middle Initial)			Date of Disburseme	ant		
A. SunTrust Bank of Nashville Mailing Address P.O. Box 305110		10 21	2015			
City						
Nashville	State Zip Code TN 37230		Transaction ID: 4	114		
Purpose of Disbursement Account Analysis Fee	001	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/ Type		123.76		
President	nent For: Primary General Other (specify)	Турс	Memo Item	, , , , , , , , , , , , , , , , , , , ,		
State: District:						
Full Name (Last, First, Middle Initial) B. SunTrust Bank of Nashville			Date of Disburseme	/ Y = Y = Y		
Mailing Address P.O. Box 305110			11 20	2015		
,	State Zip Code TN 37230		Transaction ID : 4	115		
Purpose of Disbursement Account Analysis Fee		001	Amount of Each Dis	sbursement this Period		
Candidate Name		Category/ Type		124.56		
	nent For: Primary General Other (specify) ▼	1,700	Memo Item			
Full Name (Last, First, Middle Initial) C. SunTrust Bank of Nashville	Full Name (Last, First, Middle Initial)					
Mailing Address P.O. Box 305110			12 / D D D 18	2015		
Nashville	State Zip Code TN 37230		Transaction ID : 4	121		
Purpose of Disbursement Account Analysis Fee		001	Amount of Each Dis	sbursement this Period		
Candidate Name		Category/ Type		123.90		
	nent For: Primary General Other (specify) ▼		Memo Item			
SUBTOTAL of Disbursements This Page (optional)				372.22		
3. (4				791.76		

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. ANAME OF COMMITTEE (in Full) WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. RYAN FOR CONGRESS Mailing Address PD BOX 1488 City JANESYILE WI S3547 Furpose of Disbursement Candidate Name City State President Senate President Senate President State: Vir District: 01 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Candidate Name City State Zip Code Wi S3547 Transaction ID: 416 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category Type Office Sought: House Senate President Senate President State: Vir District: 01 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement this Period Category Type Memo Item Amount of Each Disbursement t	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I			
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) WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. RYAN FOR CONGRESS Mailing Address PO BOX 1488 City State Zip Code JANESVILLE WI S3S47 Purpose of Disbursement Contribution Candidate Name Category' 1000.00 Memo kem Disbursement Ton: 2016 State: WI District of Tell Name (Last, First, Middle Initial) Amount of Each Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State: Disbursement City State: Disburs	IIEMIZED DISBUKSEMENIS	for each category of the	21b	22 🗙 23 🗆 24 📄 25 📄 26		
NAME OF COMMITTEE (in Full) WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ARYAN FOR CONGRESS Mailing Address PO BOX 1488 City State Zip Code WI 53547 Purpose of Disbursement Contribution Candidate Name PAUL D. RYAN Office Sought: House Senate Primary General Primary General Purpose of Disbursement Candidate Name Category' Type Office Sought: House Senate Primary General						
AR RYAN FOR CONGRESS Mailing Address PO BOX 1488 City State Zip Code Wil 53547 Purpose of Disbursement Contribution Candidate Name PAUL D. RYAN Transaction ID: 416 Amount of Each Disbursement this Period Category/ Type Total Category/ Type Total Category/ Type Memo Item Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Transaction ID: 416 Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Transaction ID: 416 Transaction ID: 416 Transaction ID: 416 Amount of Each Disbursement this Period Transaction ID: 416 Transaction ID:	NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PO	•				
Mailing Address PO BOX 1488 City State Zip Code WI 53547 Purpose of Disbursement Contribution Candidate Name PAUL D. RYAN Office Sought: House Senate President State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President Other (specify) ▼ Date of Disbursement this Period Category/ Type Amount of Each Disbursement Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Office Sought: House Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement Amount of Each Disbursement State Zip Code Purpose of Disbursement Candidate Name Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item State Zip Code Purpose of Disbursement Disbursement For: Category/ Type Office Sought: House Senate Primary General Disbursement Primary General Disbursement D	_			Date of Dishursoment		
City State Zip Code Purpose of Disbursement Candidate Name PAUL D. RYAN City State Zip Code Purpose of Disbursement Candidate Name Category' Total Name (Last, First, Middle Initial) Category' Total Name (Last, First, Middle Initial) Candidate Name Candidate Name Category' Total Name (Last, First, Middle Initial) Category' Total Name (Last, First, Middle Initial) Candidate Name Category' Total Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category' Type Category' Type Memoltem Amount of Each Disbursement this Period Category' Type City State Zip Code Purpose of Disbursement Candidate Name Category' Type Memoltem Category' Type Memoltem Amount of Each Disbursement this Period Category' Type Memoltem Amount of Each Disbursement this Period Category' Type Category' Type Memoltem Category' Memoltem Category' Type Memoltem Category' Type Memoltem Category' Memoltem Category' Type Memoltem Ca	KYAN FUR CUNGRESS					
JANESVILLE WI 53547 Purpose of Disbursement Contribution Candidate Name PAUL D. RYAN Office Sought:	Mailing Address PO BOX 1488					
Purpose of Disbursement Contribution Candidate Name PAUL D. RYAN Office Sought: Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Office Sought: House Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Disbursement For: General Other (specify) ▼ Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Substrotal of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of	· ·			Transaction ID : 416		
Contribution Candidate Name PAUL D. RYAN Office Sought: House President State: WI District: 01 Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Primary General Primary General Primary Cher (specify) We Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement Amount of Each Disbursement Category/ Type Office Sought: House Primary General Other (specify) We Date of Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) We Date of Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) We Date of Disbursement this Period Category/ Type Office Sought: House Disbursement Category/ Type Office Sought: House Disbursement For: Gandidate Name Category/ Type Office Sought: House Disbursement For: Gandidate Name Category/ Type Office Sought: House Disbursement For: Gandidate Name Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item State: District: Memo Item Substruction of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Substruction of Each Disbursement this Period Category/ Type Memo Item 1000.00	0	WI 53547				
PAUL D. RYAN Office Sought:	Contribution		011	Amount of Each Disbursement this Period		
Office Sought: House Senate President Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President Disbursement For: General President District: State: District: Di				1000.00		
Senate President Other (specify) State: WI District: 01 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: State Zip Code Purpose of Disbursement Category/ Type Office Sought: House State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Senate President Other (specify) Office Sought: House Senate President Other (specify) Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) Office Sought: District: Substoral of Disbursement this Period	_	nent For: 2016	Туре	Momo Itom		
Amount of Each Disbursement Category	Senate	Primary General		мето цет		
Amount of Each Disbursement Candidate Name Category/ Office Sought: House Primary General State: District: Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code Purpose of Disbursement City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Senate President Other (specify) ▼ Substortal of Disbursement This Page (optional) ■ 1000.00						
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Memo Item Date of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement Category/ Type Office Sought: House Primary General Other (specify) ▼ Senate Primary General Other (specify) ▼ Substortal of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial) B.			Date of Disbursement		
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement Amount of Each Disbursement Amount of Each Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Primary General Other (specify) Senate President Other (specify) State: District: Substockate Of Disbursement This Page (optional) 1000.00	Mailing Address			M - M / D - D / Y - Y - Y		
Candidate Name Category/ Type	City	State Zip Code				
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: General Other (specify) State: District: Substortal of Disbursements This Page (optional)	Purpose of Disbursement					
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: Substitute Other (specify) Substit				Amount of Each Disbursement this Period		
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: Substrate Disbursement For: Senate Primary General Other (specify) State: District: Substrate Tip Code Memo Item Memo Item Memo Item Amount of Each Disbursement this Period Other (specify) Memo Item 1000.00	Candidate Name] '				
State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substock State	Senate	Primary General	.,,,,			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrotal of Disbursements This Page (optional)		, , , , , , , , , , , , , , , , , , ,				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial) C.					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substotal of Disbursements This Page (optional)	Mailing Address	Mailing Address				
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substitute	City	State Zip Code				
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Substrict: Substrict: Name Name Name Name Name Name Name Name	Purpose of Disbursement	Purpose of Disbursement				
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Substitution State Substitution of Disbursements This Page (optional)	Candidate Name					
SOBTOTAL OF DISBURSEMENTS THIS Fage (optional)	Senate President	Primary General	21.5			
SOBTOTAL OF DISBURSEMENTS THIS Fage (optional)	SURTOTAL of Dishursements This Page (ontional)			1000.00		
TOTAL This Period (last page this line number only)	CODITION OF DISDUISEMENTS THIS FAYE (OPHONAI)			7 7 7		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF (check only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Crieck Only One)
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PO		
Full Name (Last, First, Middle Initial) A. Deneen Huber		Date of Disbursement
Mailing Address 375 South End Ave AptK	08 12 / 2015	
New York	State Zip Code NY 10280	Transaction ID : 447
Purpose of Disbursement Refund		010 Amount of Each Disbursement this Period
Candidate Name		Category/ Type 500.04
President	nent For: Primary General Other (specify) ▼	Memo Item
State: District:		
Full Name (Last, First, Middle Initial) B. Gary Windt		Date of Disbursement
Mailing Address 707 S School St		08 10 2015
Lombard	State Zip Code IL 60148	Transaction ID : 445
Purpose of Disbursement Refund		010 Amount of Each Disbursement this Period
Candidate Name		Category/ Type 120.00
	nent For: Primary General Other (specify)	Memo Item
Full Name (Last, First, Middle Initial) Jay Kirschbaum		Date of Disbursement
Mailing Address 1520 Woodroyal East Dr		08 10 2015
Chesterfield	State Zip Code TN 63017	Transaction ID : 444
Purpose of Disbursement Refund Candidate Name		010 Amount of Each Disbursement this Period
		Category/ Type 500.04
	nent For:	Memo Item
Senate	Primary General Other (specify) ▼	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check only	NE NUMBER: PAGE 13 OF 14		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23 24 25 26 X 28a 28b 28c 29 30		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PO	•				
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. Kenneth Vincent Mailing Address 10419 Greenhedges Drive			08 12 2015		
City	State Zip Code				
Tampa	FL 33626		Transaction ID: 449		
Purpose of Disbursement Refund		010	Amount of Each Disbursement this Period		
Candidate Name		Category/	75.00		
	nent For: Primary General Other (specify)	Туре	Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) B. Ron Alexander			Date of Disbursement		
Mailing Address 1604 Bingham Dr			08 10 2015		
Knoxville	State Zip Code TN 37922		Transaction ID: 443		
Purpose of Disbursement Refund		010	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	249.96		
	nent For: Primary General Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial) C. Scot Housh			Date of Disbursement		
Mailing Address 4209 Country Club Rd			08 10 2015		
Edina	State Zip Code MN 55424		Transaction ID: 446		
Purpose of Disbursement Refund		010	Assessed of Early Disharman and this Basical		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 30.00		
	nent For:	, , , , , , , , , , , , , , , , , , ,	Memo Item		
	Primary General Other (specify) ▼				

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 14 OF 14		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) WILLIS NORTH AMERICA INC PC					
Full Name (Last, First, Middle Initial) - Todd Jones			Date of Disburseme	ent	
Mailing Address 713 Honey Farm Road	08 12 2015				
City	state Zip Code				
Lititz	PA 17543		Transaction ID: 4	48	
Purpose of Disbursement Refund		010	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/		294.96	
President	nent For: Primary General Other (specify)	Туре	Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) 3.			Date of Disburseme	ent	
Mailing Address			W = M / D = D		
City	state Zip Code				
Purpose of Disbursement	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type		, , , ,	
	nent For: Primary General Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)			Date of Disburseme		
Mailing Address			M M / D D	/	
City	state Zip Code				
Purpose of Disbursement					
Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period	
	nent For: Primary General Other (specify) ▼		Memo Item		
				294.96	
SUBTOTAL of Disbursements This Page (optional)		······		234.30	
TOTAL This Period (last page this line number only).				1770.00	