

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Truth PAC

ADDRESS (number and street) 1201 Third Avenue Suite 4900 Seattle WA 98101

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00628420

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), Convention (12C), General (12G), Special (12S), Runoff (12R)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on 11/08/2016 in the State of WA

5. Covering Period 11/02/2016 through 11/28/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Brass, Dick, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Brass, Dick, , ,

[Electronically Filed]

Date

12/08/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Truth PAC

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="130000.00"/>	<input type="text" value="130000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="130000.00"/>	<input type="text" value="130000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="98831.20"/>	<input type="text" value="98831.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31168.80"/>	<input type="text" value="31168.80"/>
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="87560.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Truth PAC

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).....	130000.00	130000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	130000.00	130000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	130000.00	130000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	130000.00	130000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	130000.00	130000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	27809.20	27809.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27809.20	27809.20
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)	71022.00	71022.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	98831.20	98831.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98831.20	98831.20

DETAILED SUMMARY PAGE
of Disbursements

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)	130000.00	130000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	130000.00	130000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27809.20	27809.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27809.20	27809.20

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

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

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)
Truth PAC

A. Dwyer, Regina, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 3rd Ave
 Ste 4900
 City Seattle State WA Zip Code 98101-3095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : VSHF8E3A296
 Amount of Each Receipt this Period 100000.00
 Memo Item

B. Manshel, Michael, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 Playa Vista Dr
 Apt 4
 City Playa Vista State CA Zip Code 90094-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 11 / 23 / 2016
Transaction ID : VSHF8E3A2S2
 Amount of Each Receipt this Period 30000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130000.00
TOTAL This Period (last page this line number only).....	130000.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
Truth PAC

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [] Transaction ID : VSGG09TX6C Amount of Each Disbursement this Period [] 600.00	
City Washington	State DC	Zip Code 20005-5006	Category/ Type []
Purpose of Disbursement Database Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. SKDKnickerbocker LLC		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 1150 18th St NW Ste 800		FEC Identification Number C [] Transaction ID : VSGG09VFYI Amount of Each Disbursement this Period [] 27099.20	
City Washington	State DC	Zip Code 20036-3845	Category/ Type []
Purpose of Disbursement Media Advertising		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 27699.20
TOTAL This Period (last page this line number only).....▶	[] 27699.20

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 14
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Truth PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson River Entertainment			Nature of Debt (Purpose): Media Production - ESTIMATE
Mailing Address 1575 Lindacrest Dr			
City Beverly Hills	State CA	Zip Code 90210-2521	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8K21	
Amount Incurred This Period 20000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lugo, Michael, , ,			Nature of Debt (Purpose): Media Production - ESTIMATE
Mailing Address 820 Locust St Apt 3205			
City Pasadena	State CA	Zip Code 91101-5612	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8K39	
Amount Incurred This Period 6680.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6680.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reuters			Nature of Debt (Purpose): Media Production - ESTIMATE
Mailing Address 50 Broad St E			
City Rochester	State NY	Zip Code 14614-2102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8K47	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	27680.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 14
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Truth PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rock, David, , ,			Nature of Debt (Purpose): Media Production - ESTIMATE
Mailing Address 1499 Stearns Dr			
City Los Angeles	State CA	Zip Code 90035-3959	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8K54	
Amount Incurred This Period 2280.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2280.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategies 360			Nature of Debt (Purpose): Communication Consulting Services
Mailing Address 1505 Westlake Ave N Ste 1000			
City Seattle	State WA	Zip Code 98109-6211	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8MG4	
Amount Incurred This Period 15000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategies 360			Nature of Debt (Purpose): Digital Marketing & Social Media
Mailing Address 1505 Westlake Ave N Ste 1000			
City Seattle	State WA	Zip Code 98109-6211	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VSEHG9H8MH2	
Amount Incurred This Period 42500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 42500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	59780.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 14
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Truth PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Yavnieli, Ron, , ,			Nature of Debt (Purpose): Media Production - ESTIMATE
Mailing Address 4821 Bakman Ave Unit 404			
City North Hollywood	State CA	Zip Code 91601-4591	

Outstanding Balance Beginning This Period 0.00		Transaction ID : VSEHG9H8K62	
Amount Incurred This Period 100.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00	

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

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

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	100.00
2) TOTALS This Period (last page this line number only)..... ▶	87560.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	87560.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Truth PAC	FEC IDENTIFICATION NUMBER ▼ C C00628420
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Hudson River Entertainment * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 04 / 2016
Mailing Address 1575 Lindacrest Dr	Amount <input type="text"/> 20000.00 Transaction ID : VSGG09TWFG9 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Beverly Hills CA 90210-2521	
Purpose of Expenditure Media Production - ESTIMATE Category/Type <input type="text"/> 004	
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 101082.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Lugo, Michael, , , * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 04 / 2016
Mailing Address 820 Locust St Apt 3205	Amount <input type="text"/> 6680.00 Transaction ID : VSGG09TWCG3 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Pasadena CA 91101-5612	
Purpose of Expenditure Media Production - ESTIMATE Category/Type <input type="text"/>	
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 101082.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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.

Brass, Dick, , ,

[Electronically Filed]

Date

/ /
12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Truth PAC
FEC IDENTIFICATION NUMBER C C00628420

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Reuters
Mailing Address 50 Broad St E
City Rochester State NY Zip Code 14614-2102
Purpose of Expenditure Media Production - ESTIMATE
Name of Federal Candidate: Trump, Donald, , ,
Calendar Year-To-Date Per Election for Office Sought 101082.00
Disbursement For: General 2016

Full Name of Payee Rock, David, , ,
Mailing Address 1499 Stearns Dr
City Los Angeles State CA Zip Code 90035-3959
Purpose of Expenditure Media Production - ESTIMATE
Name of Federal Candidate: Trump, Donald, , ,
Calendar Year-To-Date Per Election for Office Sought 101082.00
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

Brass, Dick, , ,

[Electronically Filed]

Date

12 / 08 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Truth PAC	FEC IDENTIFICATION NUMBER ▼ C C00628420
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item SKDKnickerbocker LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1150 18th St NW Ste 800		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20036-3845	Transaction ID : VSGG09TWCZ1
Purpose of Expenditure Media Advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Strategies 360		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1505 Westlake Ave N Ste 1000		Amount <input type="text"/>	
City Seattle	State WA	Zip Code 98109-6211	Transaction ID : VSGG09TWDV2
Purpose of Expenditure Digital & Media Advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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.

Brass, Dick, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Truth PAC	FEC IDENTIFICATION NUMBER ▼ C C00628420
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Yavnieli, Ron, , , *	<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4821 Bakman Ave Unit 404		Amount <input type="text"/> 100.00
City North Hollywood	State CA	
Zip Code 91601-4591	Purpose of Expenditure Media Production - ESTIMATE	Transaction ID : VSGG09TWCK6
Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Trump, Donald, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 101082.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address		Amount <input type="text"/>
City	State	
Zip Code	Purpose of Expenditure	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type <input type="text"/>	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: _____		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	<input type="text"/>
(a) TOTAL Independent Expenditures	▶	<input type="text"/> 71022.00

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.

Brass, Dick, , , [Electronically Filed] Date / /

Signature