

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**

IMPACT

ADDRESS (number and street) 192 Lexington Ave.
Suite 1001
New York NY 10016

Check if different than previously reported. (ACC)

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

C C00348607 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Barrett, David, A., ,
Type or Print Name of Treasurer

Signature of Treasurer *Barrett, David, A.,* [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

IMPACT

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="219818.90"/>	<input type="text" value="219818.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="265839.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="232500.11"/>	<input type="text" value="751679.99"/>
(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="498339.57"/>	<input type="text" value="971498.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="69837.64"/>	<input type="text" value="542996.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="428501.93"/>	<input type="text" value="428501.93"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

IMPACT

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).....	15000.00	53350.00
(ii) Unitemized	0.00	190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15000.00	53540.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	193500.00	674000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	208500.00	727540.00
12. Transfers From Affiliated/Other Party Committees.....	24000.00	24000.00
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	138.90
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.11	1.09
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)).....▶	232500.11	751679.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	232500.11	751679.99

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	59837.64	352496.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	59837.64	352496.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	179500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	5000.00
(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	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	6000.00
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)) ..	69837.64	542996.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69837.64	542996.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	208500.00	727540.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	208500.00	722540.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	59837.64	352496.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	138.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	59837.64	352358.06

**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 39
<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

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)
IMPACT

A. Van Heuvelen, Robert, Irvine, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 North Sage Street
 City Kalamazoo State MI Zip Code 49006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 VH Strategies CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 11 / 14 / 2016
Transaction ID : C10735283
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Schulman, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 North Moore Street
 Apartment 6
 City New York State NY Zip Code 10013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PayPal CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : C10730307
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Chasin, Dana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1640 16th St NW
 City Washington State DC Zip Code 20009-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self Employed Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 11 / 22 / 2016
Transaction ID : C10737098
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00

**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 7 OF 39
<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)
IMPACT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. UNUM Political Action Committee

Mailing Address 1 Fountain Square

City Chattanooga	State TN	Zip Code 37402
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FEC ID number of contributing federal political committee. **C** C00177436

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : C10738880

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. League of Conservation Voters Action Fund

Mailing Address 1920 L Street, NW
Suite 800

City Washington	State DC	Zip Code 20036-4201
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FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : C10738890

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NEA Fund for Children & Public Education

Mailing Address 1201 16th Street, NW
Suite 421

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : C10736760

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8500.00
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: (check only one)	PAGE 8 OF 39
<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)
IMPACT

A. American Land Title Association Title Industry PAC (TIPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M Street, NW
Suite 300S

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
11 / 03 / 2016
Transaction ID : C10736750

Amount of Each Receipt this Period
2500.00

Memo Item

B. Consumer Technology Association PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 South Eads Street

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
11 / 09 / 2016
Transaction ID : C10738881

Amount of Each Receipt this Period
2500.00

Memo Item

C. T-Mobile USA, Inc. Political Action Committee (T-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 Pennsylvania Avenue NW
Suite 800 North Building

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 03 / 2016
Transaction ID : C10736751

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
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: (check only one)	PAGE 9 OF 39
<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)
IMPACT

A. American Association for Justice Political Action Committee (AAJ PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 777 6th Street NW
Suite 200

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : C10736761

Amount of Each Receipt this Period
5000.00

Memo Item

B. Independent Community Bankers of America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1615 L Street, NW
Suite 900

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : C10731921

Amount of Each Receipt this Period
5000.00

Memo Item

C. National Association of Letter Carriers of U.S.A. Political Fund (Letter Carrier Political Fund)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 Indiana Ave., NW

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : C10738882

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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: (check only one)	PAGE 10 OF 39
<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)
IMPACT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Health Care Association PAC

Mailing Address 1201 L Street, NW

City Washington	State DC	Zip Code 20005-4024
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FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : C10731922

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. International Brotherhood of Electrical Workers Political Action Committee

Mailing Address 900 Seventh Street, NW

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : C10736752

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. United Technologies Corporation Political Action Committee

Mailing Address 1101 Pennsylvania Avenue, NW
10th Floor

City Washington	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : C10736762

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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: (check only one)	PAGE 11 OF 39
<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)
IMPACT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Advanced Medical Technology Association Political Action Committee			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2016
Mailing Address 701 Pennsylvania Ave NW Suite 800			Transaction ID : C10738883
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00340356		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Corning Incorporated Employees Political Action Committee (COREPAC)			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 325 7th Street, NW Suite 600			Transaction ID : C10736753
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C C00033589		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Humana Inc. PAC			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2016
Mailing Address 975 F Street, NW Suite 550			Transaction ID : C10736763
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00271007		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional).....	11500.00
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: (check only one)	PAGE 12 OF 39
<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)
IMPACT

A. American Bankers Association PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 Connecticut Avenue, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : C10731923

Amount of Each Receipt this Period
5000.00

Memo Item

B. SEIU COPE (Service Employees International Union Committee On Political Education)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1800 Massachusettes Avenue, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : C10738884

Amount of Each Receipt this Period
5000.00

Memo Item

c. Walt Disney Company Employees PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 425 3rd Street, SW Suite 1100

City Washington	State DC	Zip Code 20024
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FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : C10736754

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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: (check only one)	PAGE 13 OF 39
<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)
IMPACT

A. Gridiron PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 Park Avenue

City New York	State NY	Zip Code 10017
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

Transaction ID : C10736764

Amount of Each Receipt this Period
5000.00

Memo Item

B. Lockheed Martin Employees' PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 Crystal Drive Suite 100

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : C10731914

Amount of Each Receipt this Period
5000.00

Memo Item

C. Wal-Mart Stores, Inc. PAC for Responsible Government
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 SW 8th Street

City Bentonville	State AR	Zip Code 72716
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : C10738885

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: (check only one)	PAGE 14 OF 39
<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)
IMPACT

A. General Electric PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 Pennsylvania Ave., NW
Suite 900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 24 / 2016
Transaction ID : C10730305

Amount of Each Receipt this Period
3000.00

Memo Item

B. Generic Pharmaceutical Association Political Action Committee
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 6th Street, NW
Suite 510

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00383463

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 24 / 2016
Transaction ID : C10731915

Amount of Each Receipt this Period
2500.00

Memo Item

C. UnitedHealth Group Incorporated PAC (United for Health)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 07 / 2016
Transaction ID : C10736745

Amount of Each Receipt this Period
5000.00

Memo Item

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: (check only one)	PAGE 15 OF 39
<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)
IMPACT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
National Emergency Medicine Political Action Committee - American College of Emergency Physicians

Mailing Address 1125 Executive Circle

City Irving	State TX	Zip Code 75038
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : C10736755

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bank of America Corporation Federal PAC

Mailing Address 1455 Pennsylvania Ave NW Suite 950
DC8-455-09-01

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : C10736765

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AT&T Inc. Federal PAC

Mailing Address 208 South Akard Street
Suite 2701

City Dallas	State TX	Zip Code 75202
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : C10731925

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
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: (check only one)	PAGE 16 OF 39
<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)
IMPACT

A. Laborer's International Union of North America (LIUNA) PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 16th Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : C10738876

Amount of Each Receipt this Period
5000.00

Memo Item

B. America's Health Insurance Plans PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 Pennsylvania Avenue, NW
South Bldg. Suite 500

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : C10730306

Amount of Each Receipt this Period
5000.00

Memo Item

C. Credit Suisse Securities (USA) LLC Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 F Street, NW
Suite 450

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

Transaction ID : C10736746

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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: (check only one)	PAGE 17 OF 39
<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)
IMPACT

A. Build Political Action Committee of the National Association of Home Builders (BUILD PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 15th Street, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : C10736756

Amount of Each Receipt this Period
5000.00

Memo Item

B. Regeneron Pharmaceuticals Inc. PAC (Regeneron PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00562264

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

Transaction ID : C10736766

Amount of Each Receipt this Period
5000.00

Memo Item

C. American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 222 South Prospect Avenue

City Park Ridge	State IL	Zip Code 60068
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : C10738886

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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: (check only one)	PAGE 18 OF 39
<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)
IMPACT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. American Academy of Dermatology Association PAC (SKINPAC)		Date of Receipt
Mailing Address 1445 New York Avenue, NW Suite 800		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00359539"/>		Transaction ID : C10738877
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. National Electrical Contractors Association Political Action Committee (NEAPAC)		Date of Receipt
Mailing Address 3 Bethesda Metro Center		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2016"/>
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00113811"/>		Transaction ID : C10738887
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Association for Advanced Life Underwriting PAC		Date of Receipt
Mailing Address 11921 Freedom Dr. Suite 1100		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2016"/>
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00447565"/>		Transaction ID : C10736747
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 19 OF 39
<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)
IMPACT

A. AmerisourceBergen Corporation Political Action Committee (ABC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 Morris Drive
Suite 100

City Chesterbrook State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : C10736767

Amount of Each Receipt this Period
5000.00

Memo Item

B. Charter Communications Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 Pennsylvania Avenue, NW
Suite 200

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : C10736757

Amount of Each Receipt this Period
1500.00

Memo Item

C. Navient Corporation PAC (Navient PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 Edmund Halley Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00331835

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : C10731917

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11500.00
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: (check only one)	PAGE 20 OF 39
<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)
IMPACT

A. Pepsico, Inc. Concerned Citizens Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 Anderson Hill Rd.

City Purchase	State NY	Zip Code 10577
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00039321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : C10738878

Amount of Each Receipt this Period
2000.00

Memo Item

B. Independent Pharmacy Cooperative PAC (IPC PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1550 Columbus Street

City Sun Prairie	State WI	Zip Code 53590
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00508309

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : C10738888

Amount of Each Receipt this Period
3000.00

Memo Item

C. American Hospital Association PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 800 Tenth Street, NW
Two City Center Suite 400

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : C10730308

Amount of Each Receipt this Period
4000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9000.00
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: (check only one)	PAGE 21 OF 39
<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)
IMPACT

A. U.S. Bancorp Political Participation Program

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 950 F Street, NW
Suite 750

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00018036

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : C10736748

Amount of Each Receipt this Period
5000.00

Memo Item

B. FedEx Corporation Political Action Committee (FedExPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 942 South Shady Grove Road

City Memphis	State TN	Zip Code 38120
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FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : C10736758

Amount of Each Receipt this Period
5000.00

Memo Item

C. United Association Political Education Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address Three Park Place

City Annapolis	State MD	Zip Code 21401
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : C10738879

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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: (check only one)	PAGE 22 OF 39
<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)
IMPACT

A. National Restaurant Association PAC (Restaurant PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00003764
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 04 / 2016**
Transaction ID : C10738889
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Food Marketing Institute Political Action Committee FOODPAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2345 Crystal Drive Suite 800
 City Arlington State VA Zip Code 22202
 FEC ID number of contributing federal political committee. **C** C00014555
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : C10730309
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Anthem, Inc. Political Action Committee (Anthem PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Monument Circle
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C** C00197228
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : C10736749
 Amount of Each Receipt this Period 4000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	193500.00

**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 23 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
IMPACT

A. Schumer Committee for the Majority
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 120 Maryland Avenue, NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00620013

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : C10736768

Amount of Each Receipt this Period
24000.00

Memo Item

Joint Fundraiser

B. Stern, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16 Overlook Road

City Scarsdale	State NY	Zip Code 10583
-------------------	-------------	-------------------

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

Name of Employer (for Individual) DJS Global Advisors	Occupation (for Individual) Advisor
----------------------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2016

Transaction ID : C10736770

Amount of Each Receipt this Period
5000.00

Memo Item

* Joint Fundraiser

C. Stern, Dianne, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16 Overlook Road

City Scarsdale	State NY	Zip Code 10583
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Writer
----------------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2016

Transaction ID : C10736771

Amount of Each Receipt this Period
5000.00

Memo Item

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional).....	24000.00
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: (check only one)	PAGE 24 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
IMPACT

A. Conway, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 Market Street
 Apartment 25G
 City San Francisco State CA Zip Code 94103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SV Angel, LLC Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : C10736772
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 * Joint Fundraiser

B. Milstein, Constance, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3210 R Street, NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Milstein Properties Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2016
Transaction ID : C10736773
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 * Joint Fundraiser

C. Goldberg, Henry, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5550 Friendship Boulevard
 Suite 580
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Artery Capital Group, LLC Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : C10736769
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	24000.00

**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

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NAME OF COMMITTEE (In Full)
IMPACT

A. Flanagan Fulkerson & Company

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 220 I Street NE
Suite 250

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

City Washington State DC Zip Code 20002

FEC Identification Number

Purpose of Disbursement Reception-Catering

C

Candidate Name

003
Category/ Type

Transaction ID : D597380

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

21144.11

Memo Item

B. Perkins Coie

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1201 Third Avenue
Suite 4800

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

City Seattle State WA Zip Code 98101

FEC Identification Number

Purpose of Disbursement Professional Services-Legal

C

Candidate Name

001
Category/ Type

Transaction ID : D597400

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

352.00

Memo Item

C. Paychex, Inc.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

City Rochester State NY Zip Code 14623

FEC Identification Number

Purpose of Disbursement Payroll Fee

C

Candidate Name

001
Category/ Type

Transaction ID : D597420

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

83.00

Memo Item

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

21579.11

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. New York State Office Of Health		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016
Mailing Address PO Box 8000		FEC Identification Number C [REDACTED] Transaction ID : D597381 Amount of Each Disbursement this Period [REDACTED] 832.30
City Rensselaer	State NY	Zip Code 12144
Purpose of Disbursement Health Insurance	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016
Mailing Address P.O. Box 15124		FEC Identification Number C [REDACTED] Transaction ID : D597401 Amount of Each Disbursement this Period [REDACTED] 45.53
City Albany	State NY	Zip Code 12212
Purpose of Disbursement Telephone	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Perkins Coie		Date of Disbursement MM / DD / YYYY 10 / 26 / 2016
Mailing Address 1201 Third Avenue Suite 4800		FEC Identification Number C [REDACTED] Transaction ID : D597382 Amount of Each Disbursement this Period [REDACTED] 468.00
City Seattle	State WA	Zip Code 98101
Purpose of Disbursement Professional Services-Legal	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1345.83
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. Flanagan Fulkerson & Company		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016
Mailing Address 220 I Street NE Suite 250		FEC Identification Number C [REDACTED] Transaction ID : D597402 Amount of Each Disbursement this Period 1440.95
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel		Category/Type 002
Candidate Name		Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Cres Inc.		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 192 Lexington Avenue Suite 1205		FEC Identification Number C [REDACTED] Transaction ID : D597396 Amount of Each Disbursement this Period 1513.11
City New York	State NY	Zip Code 10016-6823
Purpose of Disbursement Rent & Utilities		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Flanagan Fulkerson & Company		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016
Mailing Address 220 I Street NE Suite 250		FEC Identification Number C [REDACTED] Transaction ID : D597397 Amount of Each Disbursement this Period 8500.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Consulting Services-Fundraising		Category/Type 003
Candidate Name		Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	11454.06
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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. Cres Inc.			Date of Disbursement MM / DD / YYYY 11 / 21 / 2016	
Mailing Address 192 Lexington Avenue Suite 1205			FEC Identification Number C [REDACTED] Transaction ID : D597427 Amount of Each Disbursement this Period 1573.57	
City New York	State NY	Zip Code 10016-6823	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Rent & Utilities		Category/ Type 001		
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) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Express EMPS			Date of Disbursement MM / DD / YYYY 11 / 03 / 2016	
Mailing Address PO Box 6600			FEC Identification Number C [REDACTED] Transaction ID : D597398 Amount of Each Disbursement this Period 41.95	
City Hagerstown	State MD	Zip Code 21740	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001		
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) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Flanagan Fulkerson & Company			Date of Disbursement MM / DD / YYYY 10 / 20 / 2016	
Mailing Address 220 I Street NE Suite 250			FEC Identification Number C [REDACTED] Transaction ID : D597379 Amount of Each Disbursement this Period 12000.00	
City Washington	State DC	Zip Code 20002	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Reception-Catering		Category/ Type 003		
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) ▼			
State: District:				

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

13615.52

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial)

A. Express EMPS

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Credit Card Processing Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
11 / 03 / 2016

FEC Identification Number
C
Transaction ID : D597399
Amount of Each Disbursement this Period
19.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Lynch, Michael, , ,

Mailing Address 317 Tennessee Ave NE

City Washington State DC Zip Code 20002-6445

Purpose of Disbursement
Travel Expense Reimbursement - See Below if Itemized

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number
C
Transaction ID : D597383
Amount of Each Disbursement this Period
765.87

Memo Item

Full Name (Last, First, Middle Initial)

C. Fairfield Inn

Mailing Address 500 H Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number
C
Transaction ID : D597384
Amount of Each Disbursement this Period
573.87

Memo Item

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

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

785.82

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

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement MM / DD / YYYY 10 / 27 / 2016
Mailing Address 10 G Street, NE		FEC Identification Number C [] Transaction ID : D597385 Amount of Each Disbursement this Period [] 192.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address Smallbiz Payroll Eagle's Landing Business Park		FEC Identification Number C [] Transaction ID : D597387 Amount of Each Disbursement this Period [] 5333.73
City Rochester	State NY	Zip Code 14623
Purpose of Disbursement Payroll Payment (See Below)	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Kutryb, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 455 West 37th Street Apartment 2208		FEC Identification Number C [] Transaction ID : D597390 Amount of Each Disbursement this Period [] 1756.81
City New York	State NY	Zip Code 10018
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5333.73
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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IMPACT

A. Weiland, Liam, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 136 Eldridge Street
Apartment 15

City New York State NY Zip Code 10002

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : D597391

Amount of Each Disbursement this Period: 566.89

Memo Item

B. Paychex, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement Payroll Taxes/Withholdings

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : D597388

Amount of Each Disbursement this Period: 2070.13

Memo Item

C. Bart, Samuel, E., ,

Full Name (Last, First, Middle Initial)

Mailing Address 65 Ainslie Street
Apartment 407

City Brooklyn State NY Zip Code 11211-3434

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : D597389

Amount of Each Disbursement this Period: 939.90

Memo Item

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. Weiland, Liam, , ,			Date of Disbursement MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 136 Eldridge Street Apartment 15			FEC Identification Number C [REDACTED] Transaction ID : D597392 Amount of Each Disbursement this Period [REDACTED] 103.16	
City New York	State NY	Zip Code 10002	Purpose of Disbursement Travel Expense Reimbursement - See Below if Itemized Category/Type 001	
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) ▼		
State: District:		<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 1455 Market Street			FEC Identification Number C [REDACTED] Transaction ID : D597394 Amount of Each Disbursement this Period [REDACTED] 32.93	
City San Francisco	State CA	Zip Code 94103	Purpose of Disbursement Travel Category/Type 002	
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) ▼		
State: District:		<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Uber			Date of Disbursement MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 1455 Market Street			FEC Identification Number C [REDACTED] Transaction ID : D597395 Amount of Each Disbursement this Period [REDACTED] 26.02	
City San Francisco	State CA	Zip Code 94103	Purpose of Disbursement Travel Category/Type 002	
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) ▼		
State: District:		<input checked="" type="checkbox"/> Memo Item		

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

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

[REDACTED] 103.16
[REDACTED]

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

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

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NAME OF COMMITTEE (In Full)
IMPACT

A. American Express

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597403

Amount of Each Disbursement this Period: 286.68

Memo Item

B. UPS Store

Full Name (Last, First, Middle Initial)

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597410

Amount of Each Disbursement this Period: 16.79

Memo Item

C. UPS Store

Full Name (Last, First, Middle Initial)

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597411

Amount of Each Disbursement this Period: 16.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 286.68

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [REDACTED] Transaction ID : D597412
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 16.67	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [REDACTED] Transaction ID : D597413
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1.01	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 600 Jefferson St. Dept. HQJ-CM		FEC Identification Number C [REDACTED] Transaction ID : D597404
City Houston	State TX	Zip Code 77002
Purpose of Disbursement Travel Credit	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] -29.00	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

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NAME OF COMMITTEE (In Full)
IMPACT

A. UPS Store

Full Name (Last, First, Middle Initial)

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597414

Amount of Each Disbursement this Period: 43.08

Memo Item

B. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 600 Jefferson St. Dept. HQJ-CM

City Houston State TX Zip Code 77002

Purpose of Disbursement Travel Credit

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597405

Amount of Each Disbursement this Period: -29.00

Memo Item

C. UPS Store

Full Name (Last, First, Middle Initial)

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2016

FEC Identification Number: C

Transaction ID : D597415

Amount of Each Disbursement this Period: 50.33

Memo Item

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [] Transaction ID : D597406 Amount of Each Disbursement this Period [] 16.01
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [] Transaction ID : D597407 Amount of Each Disbursement this Period [] 36.16
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [] Transaction ID : D597408 Amount of Each Disbursement this Period [] 2.17
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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) ▼	
State: District:		

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

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. UPS Store		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 105 East 34th Street		FEC Identification Number C [] Transaction ID : D597409 Amount of Each Disbursement this Period [] 34.35
City New York	State NY	Zip Code 10016
Purpose of Disbursement Postage		Category/ Type 001
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016
Mailing Address Smallbiz Payroll Eagle's Landing Business Park		FEC Identification Number C [] Transaction ID : D597421 Amount of Each Disbursement this Period [] 5333.73
City Rochester	State NY	Zip Code 14623
Purpose of Disbursement Payroll Payment (See Below)		Category/ Type 001
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016
Mailing Address Smallbiz Payroll Eagle's Landing Business Park		FEC Identification Number C [] Transaction ID : D597422 Amount of Each Disbursement this Period [] 2070.12
City Rochester	State NY	Zip Code 14623
Purpose of Disbursement Payroll Taxes/Withholdings		Category/ Type 001
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5333.73
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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IMPACT

Full Name (Last, First, Middle Initial) A. Bart, Samuel, E., ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 65 Ainslie Street Apartment 407		FEC Identification Number C [REDACTED] Transaction ID : D597423 Amount of Each Disbursement this Period [REDACTED] 939.91	
City Brooklyn	State NY	Zip Code 11211-3434	Category/Type 001
Purpose of Disbursement Payroll		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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Kutryb, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 455 West 37th Street Apartment 2208		FEC Identification Number C [REDACTED] Transaction ID : D597424 Amount of Each Disbursement this Period [REDACTED] 1756.81	
City New York	State NY	Zip Code 10018	Category/Type 001
Purpose of Disbursement Payroll		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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Weiland, Liam, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 136 Eldridge Street Apartment 15		FEC Identification Number C [REDACTED] Transaction ID : D597425 Amount of Each Disbursement this Period [REDACTED] 566.89	
City New York	State NY	Zip Code 10002	Category/Type 001
Purpose of Disbursement Payroll		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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

[REDACTED] 0.00

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

[REDACTED] 59837.64

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)
IMPACT

A. Foster Campbell for the US Senate

Full Name (Last, First, Middle Initial)
Mailing Address 650 Olive Street

City Shreveport State LA Zip Code 71104

Purpose of Disbursement Contribution
Candidate Name **Campbell, Foster, Lonnie, , II**

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) Runoff

State: LA District: 00

Date of Disbursement: 11 / 21 / 2016

FEC Identification Number: C00611988
Transaction ID : D597426
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

B. Espailat for Congress 2016

Full Name (Last, First, Middle Initial)
Mailing Address 210 Sherman Avenue Suite B

City New York State NY Zip Code 10034

Purpose of Disbursement Contribution
Candidate Name **Espailat, Adriano, , ,**

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: NY District: 13

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C00593525
Transaction ID : D597386
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number:

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

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