

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2015 JUL 30 AM 11:36
Office Use Only

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

VIKING LEADERSHIP PAC

ADDRESS (number and street) PO Box 22202

Check if different than previously reported. (ACC) EAGAN MN 55122

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

C00565036

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

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

Election on MM / DD / YYYY in the State of

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

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / 2015 through MM / DD / 2015

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

Type or Print Name of Treasurer Michael Weidner

Signature of Treasurer *[Signature]* Date MM / DD / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Viking Leadership PAC

Report Covering the Period: From:

'

To:

'

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | | <input type="text" value="8.38"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="8.38"/> | |
| (c) Total Receipts (from Line 19)..... | <input type="text" value="9,503.00"/> | <input type="text" value="9,503.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="9,511.38"/> | <input type="text" value="9,511.38"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="9,500.85"/> | <input type="text" value="9,500.85"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="10.53"/> | <input type="text" value="10.53"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Viking Leadership PAC

Report Covering the Period: From:

MM ' DD ' YYYY
01 ' 01 ' 2015

To:

MM ' DD ' YYYY
06 ' 30 ' 2015

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

8,300.00
200.00
8,500.00

8,300.00
200.00
8,500.00

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

8,500.00

8,500.00

12. Transfers From Affiliated/Other Party Committees.....

1,003.00

1,003.00

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

- (b) Levin Funds (from Schedule H5).....

- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

9,503.00

9,503.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

9,503.00

9,503.00

NON-FEDERAL AND LEVIN FUNDS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

| | | |
|--|----------|----------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | | |
| (ii) Non-Federal Share..... | | |
| (b) Other Federal Operating Expenditures | | 85 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | 85 |
| 22. Transfers to Affiliated/Other Party Committees..... | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 9,500.00 | 9,500.00 |
| 24. Independent Expenditures (use Schedule E) | | |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | | |
| 26. Loan Repayments Made..... | | |
| 27. Loans Made..... | | |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs)..... | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | | |
| 29. Other Disbursements | | |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | | |
| (ii) "Levin" Share..... | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..... | | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 9,500.85 | 9,500.85 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 9,500.85 | 9,500.85 |

NON-FEDERAL SHARE

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

| | | |
|--|----------|----------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 8,500.00 | 8,500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 8,500.00 | 8,500.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 8.5 | 8.5 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 8.5 | 8.5 |

40451000 : NO : ON : NO : UNION

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

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

| | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF | |
| <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"/> 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)
Viking Leadership PAC

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Emmer Thomas E Jr. | | Date of Receipt MM / DD / YYYY | |
| Mailing Address 1190 Hidden Hills Dr. | | | |
| City Delano | State MN | Zip Code 55328 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 800.00 | |
| Name of Employer US Congress | Occupation Congressman | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3,800.00 | | |

| | | | |
|---|--------------------------|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. | | Date of Receipt MM / DD / YYYY | |
| Mailing Address | | | |
| City | State | Zip Code | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period | |
| Name of Employer | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | | |

| | | | |
|---|--------------------------|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt MM / DD / YYYY | |
| Mailing Address | | | |
| City | State | Zip Code | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period | |
| Name of Employer | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | |
| TOTAL This Period (last page this line number only).....▶ | 8,300.00 |

NON-FEDERAL CAMPAIGN FINANCING

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

| | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|
| FOR LINE NUMBER: | | | PAGE | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <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)

Viking Leadership PAC

Full Name (Last, First, Middle Initial)

A. Emmas Victory Committee

Mailing Address

824 S Millidge Ave. Ste. 101

City: Athens State: GA Zip Code: 30605

FEC ID number of contributing federal political committee.

C00573444

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,003.00

Date of Receipt

06 / 25 / 2015

Amount of Each Receipt this Period

1,003.00

Transfer of Net Funds^{JFC}

B. Hayden Michael

Mailing Address

6704 Parkwood Lane

City: Minneapolis State: MN Zip Code: 55436-1736

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

05 / 22 / 2015

Amount of Each Receipt this Period

2,500.00

[memo item]

C.

Mailing Address

City: State: Zip Code:

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

1,003.00

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

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NAME OF COMMITTEE (In Full)
Viking Leadership PAC

A. Ryan Costello for Congress

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06/16/2015**

Mailing Address **PO BOX 3154**

City **West Chester** State **PA** Zip Code **19381**

Purpose of Disbursement **Contribution**

Candidate Name **Ryan Costello**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **PA** District: **0**

Amount of Each Disbursement this Period **500.00**

B. Steve Knight for Congress

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06/16/2015**

Mailing Address **PO Box 984**

City **Willows** State **CA** Zip Code **95988-0984**

Purpose of Disbursement **Contribution**

Candidate Name **Steve Knight**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **CA** District: **25**

Amount of Each Disbursement this Period **500.00**

C. Rodney for Congress

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06/16/2015**

Mailing Address **PO Box 344**

City **Taylorville** State **IL** Zip Code **62568-0344**

Purpose of Disbursement **Contribution**

Candidate Name **Rodney Davis**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **IL** District: **13**

Amount of Each Disbursement this Period **500.00**

SUBTOTAL of Disbursements This Page (optional) _____ ▶

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

20150616 10:00:00 AM

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

Viking Leadership PAC

Full Name (Last, First, Middle Initial)

| | | |
|--|--|---|
| A. <u>Walberg for Congress</u> | | Date of Disbursement |
| Mailing Address <u>PO Box 1362</u> | | <u>06/16/2015</u> |
| City | State | Zip Code |
| <u>Jackson</u> | <u>MI</u> | <u>49204-1362</u> |
| Purpose of Disbursement | Category/ Type | Amount of Each Disbursement this Period |
| <u>Contribution</u> | | |
| Candidate Name | | |
| <u>Tim Walberg</u> | | |
| Office Sought: | Disbursement For: | |
| <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: <u>MI</u> District: <u>7</u> | | |

| | | |
|--|--|---|
| B. <u>Benishchek for Congress, Inc.</u> | | Date of Disbursement |
| Mailing Address <u>PO Box 108</u> | | <u>06/16/2015</u> |
| City | State | Zip Code |
| <u>Gladstone</u> | <u>MI</u> | <u>49837-0108</u> |
| Purpose of Disbursement | Category/ Type | Amount of Each Disbursement this Period |
| <u>Contribution</u> | | |
| Candidate Name | | |
| <u>Dan Benishchek</u> | | |
| Office Sought: | Disbursement For: | |
| <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: <u>MI</u> District: <u>1</u> | | |

| | | |
|--|--|---|
| C. <u>Tom MacArthur for Congress Inc.</u> | | Date of Disbursement |
| Mailing Address <u>PO Box 225</u> | | <u>06/25/2015</u> |
| City | State | Zip Code |
| <u>Colonia</u> | <u>NJ</u> | <u>07067-0225</u> |
| Purpose of Disbursement | Category/ Type | Amount of Each Disbursement this Period |
| <u>Contribution</u> | | |
| Candidate Name | | |
| <u>Tom MacArthur</u> | | |
| Office Sought: | Disbursement For: | |
| <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: <u>NJ</u> District: <u>3</u> | | |

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

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

20150616 10:00 AM

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

Viking Leadership PAC

Full Name (Last, First, Middle Initial)

A. Mooney for Congress

Date of Disbursement

06/30/2015

Mailing Address

PO Box 1863

City

Martinsburg

State

WV

Zip Code

25402

Purpose of Disbursement

Contribution

Candidate Name

Alex Mooney

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: WV

District: 2

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

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

9,500.00

NON-FUNCTIONAL COPY

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

| | | | | | | | | |
|---|---|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|------|----|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | | | | PAGE | OF |
| | <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | | |
| | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30 | | |

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NAME OF COMMITTEE (In Full)
Viking Leadership PAC

A. Full Name (Last, First, Middle Initial)
US Bank

Date of Disbursement
06 / 12 / 2015

Mailing Address
1817 Plymouth Rd

City **Minnetonka** State **MN** Zip Code **55305-1467**

Purpose of Disbursement
Bank Fee

Candidate Name _____ Category/Type _____

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

Amount of Each Disbursement this Period
85

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

Date of Disbursement
_____ / _____ / _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____ Category/Type _____

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

Amount of Each Disbursement this Period

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

Date of Disbursement
_____ / _____ / _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____ Category/Type _____

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

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) _____

TOTAL This Period (last page this line number only) _____ **85**

W11451-0001 W010W1NO101010N

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PRESS FIRMLY TO SEAL

USPS TRACKING #



9114 9999 4431 4862 4517 62

LA8400R Aug 2013 7690-17-000-0688

PRIORITY MAIL ★

DATE OF DELIVERY SPECIFIED *

USPS TRACKING™ INCLUDED *

INSURANCE INCLUDED *

PICKUP AVAILABLE

* Domestic only

AT RATE ENVELOPE

AT RATE ★ ANY WEIGHT*



S000001000014

EP14F Apr 2015
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PAID
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JUL 27 2015
AMOUNT



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00042563-10



1024

20463

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UNITED STATES POSTAL SERVICE®
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Alberville MN
55301
TO: Federal Election
Commission
999 E St, NW
Washington, DC 20463

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FOR DOMESTIC AND INTERNATIONAL USE

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LABEL MAY BE REQUIRED.

