

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

CARLY FOR PRESIDENT

ADDRESS (number and street)

1020 N FAIRFAX ST

STE 200

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00577312

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

Thirtieth day report following the General Election

on / /

Twelfth day report preceding election

on / / in the State of

Is this Report an Amendment?

yes

no

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.

Type or Print Name of Treasurer

JOSEPH R SCHMUCKLER

Signature of Treasurer

JOSEPH R SCHMUCKLER

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

CARLY FOR PRESIDENT

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="0.00"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="1704703.74"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="1704703.74"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	<input type="text" value="714044.94"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="990658.80"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION	<input type="text" value="0.00"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	<input type="text" value="1699127.35"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="708469.94"/>

DETAILED SUMMARY PAGE
of Receipts

NAME OF COMMITTEE (in Full)

CARLY FOR PRESIDENT

Report Covering the Period: From:

M M / D D / Y Y Y Y
04 / 01 / 2015

To:

M M / D D / Y Y Y Y
06 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	975778.77	975778.77
(ii) unitemized	728423.58	728423.58
(iii) Total contributions	1704202.35	1704202.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	500.00	500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	1704702.35	1704702.35
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	0.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	0.00
21. OTHER RECEIPTS (Dividends, Interest, etc.)	1.39	1.39
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	1704703.74	1704703.74

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

PAGE 4 / 594

NAME OF COMMITTEE (in Full)

CARLY FOR PRESIDENT

Report Covering the Period:

From:

M M /

D D /

Y Y Y Y

04 / 01 / 2015

To:

M M /

D D /

Y Y Y Y

06 / 30 / 2015

II. DISBURSEMENTS**COLUMN A
Total This Period****COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	708469.94	708469.94
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	5575.00	5575.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	5575.00	5575.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	714044.94	714044.94

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00577312

CARLY FOR PRESIDENT

ADDRESS (number and street) 1020 N FAIRFAX ST

STE 200

ALEXANDRIA

CITY

VA

STATE

22314

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ALBERT AUDETTE

Mailing Address 400 MAIN ST SUITE 800

City State Zip Code
STAMFORD CT 06901-3000

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

Name of Employer Occupation
SELF ROMAN CATHOLIC PRIEST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.203203

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
T JAY BURDETT

Mailing Address 2009 AVE T

City State Zip Code
HUNTSVILLE TX 77340-4928

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

Name of Employer Occupation
T J BURDETT & SONS INC METAL DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.203879

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LAUREN CARNEY

Mailing Address 30 NORWAY HILL

City State Zip Code
HANCOCK NH 03449-5609

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203809

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 3350.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. CARLETON S. FIORINA

Mailing Address 11201 GUNSTON ROAD

City MASON NECK State VA Zip Code 22079-4006

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

Name of Employer CHAIRMAN Occupation GOOD360

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203538B

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. FRANK FIORINA

Mailing Address 11201 GUNSTON ROAD

City MASON NECK State VA Zip Code 22079-4006

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203539

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
LISA GRACE-KELLOGG

Mailing Address 31220 LOBO CANYON ROAD

City AGOURA HILLS State CA Zip Code 91301-3407

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

Name of Employer AMERICAN PRINT MEDIA Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
616.00

Transaction ID : SA17.203859

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **500.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
YEDIDIA HARARI

Mailing Address 4206 BELL BLVD 244

City State Zip Code
BAYSIDE NY 11361-2862

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

Name of Employer Occupation
NLYH LLC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
990.00

Transaction ID : SA17.203201

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
990.00

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

Mailing Address 2 VENUS COURT

City State Zip Code
TIBURON CA 94920-1308

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

Name of Employer Occupation
TRITON CONTAINER INT'L INC FINANCIAL ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203079

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
SUSIE HOELLER

Mailing Address 2845 DEVONOAK BLVD

City State Zip Code
LAND O LAKES FL 34638-4368

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

Name of Employer Occupation
HOELLER LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203067

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 1050.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MACK LINDSEY

Mailing Address 9501 CEDAR CREST DRIVE

City State Zip Code
AUSTIN TX 78750-2724

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
213.00

Transaction ID : SA17.203164

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
313.00

Transaction ID : SA17.203194

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
SUSAN MADOLE

Mailing Address 4113 WINDSOR PARKWAY

City State Zip Code
DALLAS TX 75205-1670

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

Name of Employer Occupation
SELF INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203044

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 425.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DAVID MATTHEW

Mailing Address 11812 BREADFRUIT LANE

City State Zip Code
VENICE FL 34292-3834

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

Name of Employer Occupation
US ARMY SOLDIER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203074

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. MICHELLE MILLER-EDWARDS

Mailing Address 550 SANTA CLARA AVENUE

City State Zip Code
REDWOOD CITY CA 94061-4128

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

Name of Employer Occupation
CICSO SYSTEMS SENIOR MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2600.00

Transaction ID : SA17.203013

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
WADE MURPHY

Mailing Address 940 HUMBOLDT ST

City State Zip Code
DENVER CO 80218-3516

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

Name of Employer Occupation
MARMIK OIL COMPANY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203069

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5400.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL O'BOYLE

Mailing Address 210 SLOAN ROAD

City LYMAN State SC Zip Code 29365-9505

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

Name of Employer SELF Occupation ORTHOPAEDIC TRAUMA SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 350.00

Transaction ID : SA17.203881

Date of Receipt
MM / DD / YYYY
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address 9 SAVANNAH CT

City STAFFORD State VA Zip Code 22554-3795

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

Name of Employer MILITARY PRIME PROPERTY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 300.00

Transaction ID : SA17.203860

Date of Receipt
MM / DD / YYYY
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ROBERT RANKIN

Mailing Address 701 MERCER ROAD

City BUTLER State PA Zip Code 16001-1841

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 300.00

Transaction ID : SA17.203836

Date of Receipt
MM / DD / YYYY
05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional)..... 400.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT REYNOLDS

Mailing Address 1104 RIO CIDADE WAY

City	State	Zip Code
SACRAMENTO	CA	95831-4470

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Transaction ID : SA17.203098

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 116 COYATEE POINT DRIVE

City	State	Zip Code
LOUDON	TN	37774-2883

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 550.00

Transaction ID : SA17.203173

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 300.00

C. Full Name (Last, First, Middle Initial)
AICARDO ROA-ESPINOSA

Mailing Address 1628 WAUNONA WAY

City	State	Zip Code
MADISON	WI	53713-1710

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

Name of Employer	Occupation
SOIL NET LLC	SMALL BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.203163

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1050.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GARY WALDEN

Mailing Address 5909 COUSTEAU CT.

City	State	Zip Code
ELK GROVE	CA	95758-4226

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Transaction ID : SA17.203049

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address 902 7TH AVENUE

City	State	Zip Code
GRAND RAPIDS	MN	55744-3420

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

Name of Employer	Occupation
PUBLIC UTILITIES COMMISSION	GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.203142

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
PAUL WRIGHT

Mailing Address 28 HAYDEN ROWE STREET

City	State	Zip Code
HOPKINTON	MA	01748-1840

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

Name of Employer	Occupation
CHARLES RIVER MEDICAL ASSOCIATES	MEDICAL DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.203214

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RON BAILEY

Mailing Address 912 W PLATT ST 200

City	State	Zip Code
TAMPA	FL	33606-2108

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 210.00

Transaction ID : SA17.203339

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 110.00

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

Mailing Address 333 MURFREESBORO PIKE

City	State	Zip Code
NASHVILLE	TN	37210-2834

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

Name of Employer	Occupation
LANDRY'S INC	RETAIL SALES ASSOCIATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.203413

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
EVAN ENGLISH

Mailing Address 12 WETHERBEE CT

City	State	Zip Code
PHOENIX	MD	21131-1600

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

Name of Employer	Occupation
CHARLES EMERGENCY PHYSICIANS	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.203380

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 260.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT FORD

Mailing Address 4705 TURNBERRY DRIVE

City State Zip Code
LAWRENCE KS 66047-1934

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

Name of Employer Occupation
CRB BUILDERS CONSTRUCTION MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203322

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL GREENE

Mailing Address P.O. BOX 1232

City State Zip Code
ROSEVILLE CA 95678-8232

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

Name of Employer Occupation
SELF-EMPLOYED LAYMAN MISSIONARY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203402

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
NORMAN HAPKE

Mailing Address 9949 HALO CIRCLE

City State Zip Code
LA MESA CA 91941-4380

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.203407

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 800.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. LAZARUS S HEYMAN

Mailing Address **667 MADISON AVENUE
12TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10065-8029**

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

Name of Employer **HEYMAN PROPERTIES** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203371

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

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

Mailing Address **15055 RIO CIRCLE**

City **RANCHO MURIETA** State **CA** Zip Code **95683-9308**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.203379

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
GAYLE LEE

Mailing Address **549 S. MAIN**

City **NAPERVILLE** State **IL** Zip Code **60540-6510**

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

Name of Employer **G. LEE RESOURCES** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203311

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **2950.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM LICHTY

Mailing Address 2326 S 128TH ST

City	State	Zip Code
BURIEN	WA	98168-3055

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BOEING	PLANNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203331

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 4420 SE 106TH ST

City	State	Zip Code
BELLEVIEW	FL	34420-6835

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SPX FLOW POWER & ENERGY	DIRECTOR, ENGINEERING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203308

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. LISA MCBEAN

Mailing Address 38 RUE FONTAINEBLEAU

City	State	Zip Code
NEWPORT BEACH	CA	92660-5905

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203439

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 29 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ROGER ROYSE

Mailing Address 1717 EMBARCADERO ROAD

City State Zip Code
PALO ALTO CA 94303-3357

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

Name of Employer Occupation
ROYSE LAW FIRM, PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17.203424

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 922 LAKE DRIVE

City State Zip Code
BEDFORD VA 24523-1314

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

Name of Employer Occupation
VIRGINIA COMMONWEALTH UNIVERSITY SIGNAGE COORDINATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203337

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL SALZHAUER

Mailing Address 589 BROADWAY

City State Zip Code
NEW YORK NY 10012-3231

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

Name of Employer Occupation
BENJAMIN PARTNERS PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.203359

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1500.00

Subtotal Of Receipts This Page (optional).....▶ 1575.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
THOMAS SCHAEFFER

Mailing Address 901 FOREST HILL ROAD

City State Zip Code
HARRISONBURG VA 22801-3301

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

Name of Employer Occupation
JAMES MADISON U. ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.203302

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 9450 SW GEMINI DR

City State Zip Code
BEAVERTON OR 97008-7105

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.203298

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GEORGE VAUGHAN

Mailing Address 8420 CULVER COURT

City State Zip Code
LAS VEGAS NV 89117-1228

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

Name of Employer Occupation
GLVPM.COM OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203397

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 625.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ERIC WOLDENBERG

Mailing Address **PRYOR CASHMAN LLP**
7 TIMES SQUARE

City **NEW YORK** State **NY** Zip Code **10021-**

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

Name of Employer **PRYOR CASHMAN LLP** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203391

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. RANDOLPH ALTSCHULER

Mailing Address **9755 AVENEL FARM DRIVE**

City **POTOMAC** State **MD** Zip Code **20854-5413**

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

Name of Employer **NEXTLINE MANUFACTURING** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203478

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
BARBARA BARRETT

Mailing Address **4617 E OCOTILLO RD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-4032**

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

Name of Employer **AEROSPACE** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203530

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **8100.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. EDGAR BERNER

Mailing Address 1230 INSPIRATION DR.

City LA JOLLA State CA Zip Code 92037-6808

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203443

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address P.O. BOX 393

City CHATHAM State MA Zip Code 02633-0393

FEC ID number of contributing federal political committee.

Name of Employer BROADMEADOW Occupation REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203562

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
TAMMY BRUCE

Mailing Address 5850 W 3RD ST #328

City LOS ANGELES State CA Zip Code 90036-6023

FEC ID number of contributing federal political committee.

Name of Employer SELF Occupation WRITER/BROADCASTER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203549

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. KENNETH CRUSE

Mailing Address 30791 HUNT CLUB DR.

City State Zip Code
SAN JUAN CAPISTRAN CA 92675-1915

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

Name of Employer Occupation
CEO ALPHA WAVE INVESTORS, LLC

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203531

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MRS. PAM CRUSE

Mailing Address 30791 HUNT CLUB DR.

City State Zip Code
SAN JUAN CAPISTRAN CA 92675-1915

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.203532

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
DEBORAH DAWSON

Mailing Address 505 CROWN VIEW DRIVE

City State Zip Code
ALEXANDRIA VA 22314-4805

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203659

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 5650.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CAROL NICHOLS

Mailing Address 4206 NORMANDY AVE

City State Zip Code
DALLAS TX 75205-2040

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CAPITAL ONE BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203652

Date of Receipt
M M / D D / Y Y Y Y
05 06 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 5110 CEDAR RIDGE DRIVE

City State Zip Code
LA GRANGE KY 40031-8960

FEC ID number of contributing federal political committee.

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS REGISTERED NURSE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203495

Date of Receipt
M M / D D / Y Y Y Y
05 06 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GINO RONCELLI

Mailing Address 330 W DUARTE RD

City State Zip Code
MONROVIA CA 91016-4519

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RONCELLI PLASTICS CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203503

Date of Receipt
M M / D D / Y Y Y Y
05 06 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
E. TODD SAVAGE

Mailing Address 126 CORTEZ ROAD

City WEST PALM BEACH State FL Zip Code 33405-4104

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

Name of Employer SAVAGE PARTNERS, LLC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.203499

Date of Receipt
MM / DD / YYYY
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

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

Mailing Address 942 16TH AVENUE EAST

City SEATTLE State WA Zip Code 98112-3918

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
823.00

Transaction ID : SA17.203490

Date of Receipt
MM / DD / YYYY
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
270.00

C. Full Name (Last, First, Middle Initial)
CLIFFORD WADE

Mailing Address 2345 WATKINS LAKE ROAD

City WATERFORD State MI Zip Code 48328-1441

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.203441

Date of Receipt
MM / DD / YYYY
05 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 1295.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

KIRK WILSON

Mailing Address 4418 BROOKVIEW DRIVE

City State Zip Code
DALLAS TX 75220-6402

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

Name of Employer Occupation
WILSON ASSOCIATES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.203505

Date of Receipt

M M / D D / Y Y Y Y
05 06 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

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

FRED M FERRERIA

Mailing Address 20026 E SUPERSTITION DR

City State Zip Code
QUEEN CREEK AZ 85142-9758

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

Name of Employer Occupation
CROWN PEST, LLC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1150.00

Transaction ID : SA17.203679

Date of Receipt

M M / D D / Y Y Y Y
05 07 2015

CONTRIBUTION

Amount of Each Receipt this Period

150.00

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

LISA GRACE-KELLOGG

Mailing Address 31220 LOBO CANYON ROAD

City State Zip Code
AGOURA HILLS CA 91301-3407

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

Name of Employer Occupation
AMERICAN PRINT MEDIA PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
616.00

Transaction ID : SA17.203703

Date of Receipt

M M / D D / Y Y Y Y
05 07 2015

CONTRIBUTION

Amount of Each Receipt this Period

16.00

Subtotal Of Receipts This Page (optional).....▶ 266.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. EMILY KINNIER

Mailing Address 350 E. TAYLOR STREET, APT 6201

City State Zip Code
SAN JOSE CA 95112-3157

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

Name of Employer Occupation
CISCO SYSTEMS, INC. TECHNICAL WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203707

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

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

Mailing Address 8 UNDERCLIFF TERRACE

City State Zip Code
WEST ORANGE NJ 07052-3930

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

Name of Employer Occupation
MANDEL, KATZ & BROSNAN LLP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
266.00

Transaction ID : SA17.203769

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
16.00

C. Full Name (Last, First, Middle Initial)
DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

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

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.203692

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
16.00

Subtotal Of Receipts This Page (optional).....▶ 182.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RONALD PETERSON

Mailing Address 30 EAST 51ST ST

City SAVANNAH State GA Zip Code 31405-2139

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

Name of Employer Occupation
BLUE CROSS BLUE SHIELD SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.203762

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 2285 DORCHESTER ST W

City FURLONG State PA Zip Code 18925-1529

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

Name of Employer Occupation
METLIFE VICE PRESIDENT GLOBAL SECURITY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203712

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BILLIE DOPSLAUF

Mailing Address 7198 JONES RD

City BRYAN State TX Zip Code 77807-9780

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.203795

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 42 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
EDWARD HATFIELD

Mailing Address 4905 BURLEY HILLS DRIVE

City State Zip Code
CINCINNATI OH 45243-4011

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RIVER TRADING COMPANY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203802

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND HENKEL

Mailing Address 4092 S. WABASH STREET

City State Zip Code
DENVER CO 80237-1755

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203905

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DAVID RAINES

Mailing Address 611 GRAMMONT STREET

City State Zip Code
MONROE LA 71201-7516

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GI CLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203801

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ELLEN ALBRECHT

Mailing Address **1 SOUTH DEARBORN STREET**

City State Zip Code
CHICAGO IL 60603-2302

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203943

Date of Receipt
M M / D D / Y Y Y Y
05 09 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address **10901 JUNIPERUS PLACE**

City State Zip Code
TAMPA FL 33618-3817

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

Name of Employer Occupation
SELF BUS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.203945

Date of Receipt
M M / D D / Y Y Y Y
05 09 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GERARDINE FERLINS

Mailing Address **88 DOW RD**

City State Zip Code
HOLLIS NH 03049-6505

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

Name of Employer Occupation
CIRTRONICS CORPORATION PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.203953

Date of Receipt
M M / D D / Y Y Y Y
05 09 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **850.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEVEN HOOLEY

Mailing Address 11308 STONY CREEK RD.

City	State	Zip Code
MILAN	MI	48160-9577

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203980

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES MCDOWELL JR

Mailing Address 6655 NORTH CANYON CREST DR

City	State	Zip Code
TUCSON	AZ	85750-0938

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DEPT OF DEFENSE	LT COL USAF (RET)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203981

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CYNTHIA PERRI

Mailing Address P.O. BOX 1619

City	State	Zip Code
TRYON	NC	28782-1619

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	HEALTH INSURANCE CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.203974

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
EMMA PRICE

Mailing Address 39 PLAZA ST.

City State Zip Code
BROOKLYN NY 11217-3906

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

Name of Employer Occupation
EDISON PRICE LIGHTING, INC MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.203955

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address 1525 S BAILEY

City State Zip Code
MOSES LAKE WA 98837-2146

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

Name of Employer Occupation
SELF CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.203995

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CAREY R. SLOAN

Mailing Address 1012 BROAD BAY LANE

City State Zip Code
LEAGUE CITY TX 77573-5818

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.203985

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 2250.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. MARY A. WUTKE

Mailing Address **6 SHEFFORD CIRCLE**

City	State	Zip Code
MADISON	WI	53719-1415

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

Name of Employer	Occupation
SELF-EMPLOYED	CLEANING SERVICE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 250.00

Transaction ID : SA17.203954

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

 50.00

B. Full Name (Last, First, Middle Initial)
MS. MARY A. WUTKE

Mailing Address **6 SHEFFORD CIRCLE**

City	State	Zip Code
MADISON	WI	53719-1415

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

Name of Employer	Occupation
SELF-EMPLOYED	CLEANING SERVICE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 250.00

Transaction ID : SA17.203956

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

 200.00

C. Full Name (Last, First, Middle Initial)
MICHAEL GALE

Mailing Address **11135 ABBOTTS WALK DRIVE**

City	State	Zip Code
JOHNS CREEK	GA	30097-8452

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

Name of Employer	Occupation
SUNTRUST BANK	COMPLIANCE OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

 300.00

Transaction ID : SA17.204017

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

 100.00

Subtotal Of Receipts This Page (optional).....▶
 350.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ERIC PAVILONIS

Mailing Address 1050 PRISM CACTUS CIR

City State Zip Code
LOVELAND CO 80537-2983

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204025

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address P.O. BOX 393

City State Zip Code
CHATHAM MA 02633-0393

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

Name of Employer Occupation
BROADMEADOW REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.204101

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JEAN CARD

Mailing Address 2203 LA GRANDE AVE.

City State Zip Code
ALEXANDRIA VA 22301-1221

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

Name of Employer Occupation
SELF/JEAN CARD INK CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204051

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 375.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RANDY CHASE

Mailing Address **6189 N. BLOSSER AVE.**

City **FRESNO** State **CA** Zip Code **93711-1608**

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

Name of Employer **STATE OF CALIFORNIA** Occupation **ASSOCIATE SAFETY ENGINEER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Transaction ID : SA17.204192

Date of Receipt
 M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address **9072 HILVERSON AVE**

City **LAS VEGAS** State **NV** Zip Code **89148-2646**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.204117

Date of Receipt
 M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
BLAKE DEVITT

Mailing Address **3215 W. GULF DR.
E-102**

City **SANIBEL** State **FL** Zip Code **33957-5651**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 204.00

Transaction ID : SA17.204120

Date of Receipt
 M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

Subtotal Of Receipts This Page (optional).....▶ _____ 250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

MARK GOETTING

Mailing Address 8636 MARICOPA TRAIL

City State Zip Code
KALAMAZOO MI 49009-4925

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BRONSON METHODIST HOSPITAL PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204074

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

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

TONY HORSLEY

Mailing Address 4333 LYNWOOD COURT

City State Zip Code
DOUGLASVILLE GA 30134-3978

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AMSI VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204125

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

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

RON JOHNSON

Mailing Address 81 MARLAND ROAD SOUTH

City State Zip Code
COLORADO SPRINGS CO 80906-4348

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CENTRAL BANCORP CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204070

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GAYLE LEE

Mailing Address 549 S. MAIN

City State Zip Code
NAPERVILLE IL 60540-6510

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

Name of Employer Occupation
G. LEE RESOURCES CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.204052

Date of Receipt
MM / DD / YYYY
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 1700 N. WATERFRONT PARKWAY

City State Zip Code
WICHITA KS 67206-6614

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

Name of Employer Occupation
MULL DRILLING CO. OIL OPERATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.204050

Date of Receipt
MM / DD / YYYY
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MARK MURILLO

Mailing Address P.O.BOX 7400

City State Zip Code
SANTA ROSA CA 95407-0400

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

Name of Employer Occupation
SELF REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204047

Date of Receipt
MM / DD / YYYY
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3300.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOEL G. PETERSON

Mailing Address 2755 E. COTTONWOOD PKWY. #40

City	State	Zip Code
SALT LAKE CITY	UT	84121-6946

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

Name of Employer	Occupation
STANFORD UNIVERSITY	PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.204065

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 30 EAST 51ST ST

City	State	Zip Code
SAVANNAH	GA	31405-2139

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

Name of Employer	Occupation
BLUE CROSS BLUE SHIELD	SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Transaction ID : SA17.204153

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
JACK D PHILLIPS

Mailing Address 4880 CHINOOK TRAIL

City	State	Zip Code
CASPER	WY	82604-5201

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

Name of Employer	Occupation
BALON CORPORATION	SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.204221

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 54 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILMA SINCLAIR

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204173

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 5010 LARNO DRIVE

City State Zip Code
ALEXANDRIA VA 22310-1238

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204057

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JEFFERY SNYDER

Mailing Address 102 SW 3RD STREET

City State Zip Code
HAVANA FL 32333-1612

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204223

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 55 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JAMES W. STYRING

Mailing Address 4561 OLDE PERIMETER WAY #2702

City ATLANTA State GA Zip Code 30346-6009

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204085

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 203 SHERWOOD DRIVE

City LAURENS State SC Zip Code 29360-2639

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204209

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ANTHONY WARD

Mailing Address 902 7TH AVENUE

City GRAND RAPIDS State MN Zip Code 55744-3420

FEC ID number of contributing federal political committee.

Name of Employer PUBLIC UTILITIES COMMISSION Occupation GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204176

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JIM WIGGINS

Mailing Address 2006 KENTWELL ROAD

City State Zip Code
COLUMBUS OH 43221-1906

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

Name of Employer Occupation
PHRONESIS PARTNERS, L.P. PORTFOLIO MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.204048

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 6212 WATERMAN AVE.

City State Zip Code
ST. LOUIS MO 63130-4809

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204082

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KORT KINNEY

Mailing Address 315 COUNTRY CLUB DRIVE

City State Zip Code
RIVERTON WY 82501-6202

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

Name of Employer Occupation
FREMONT CHEVROLET BUICK GMC GSM

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.204352

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 950.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 57 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

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

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.204253

Date of Receipt

M M / D D / Y Y Y Y
05 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

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

HENRY OLINDE

Mailing Address 1459 OAKLEY DRIVE

City State Zip Code
BATON ROUGE LA 70806-8620

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

Name of Employer Occupation
OLINDE & MERCER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.204345

Date of Receipt

M M / D D / Y Y Y Y
05 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

ADAM STOLINSKI

Mailing Address 9450 SW GEMINI DR

City State Zip Code
BEAVERTON OR 97008-7105

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.204238

Date of Receipt

M M / D D / Y Y Y Y
05 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 150.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. RANDALL P. BORCHERDING

Mailing Address 155 RETIRO WAY

City State Zip Code
SAN FRANCISCO CA 94123-1216

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.204453

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

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

Mailing Address 5907 N. ROCKING RD

City State Zip Code
SCOTTSDALE AZ 85250-4500

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

Name of Employer Occupation
CROSBY WRIGHT PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
770.00

Transaction ID : SA17.220837

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
770.00

C. Full Name (Last, First, Middle Initial)
MS. VIRGINIA A. SIMPSON

Mailing Address 6022 N. 51ST PLACE

City State Zip Code
PARADISE VALLEY AZ 85253-5144

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
925.00

Transaction ID : SA17.220836

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
425.00

Subtotal Of Receipts This Page (optional).....▶ 1345.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DOUG VANDERVEER

Mailing Address 3783 CATALINA DR

City State Zip Code
BEAVERCREEK OH 45431-8107

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

Name of Employer Occupation
SERCO SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.204413

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 10041 HEYWOOD LN

City State Zip Code
HIGHLANDS RANCH CO 80130-8860

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

Name of Employer Occupation
CISCO SYSTEMS SYSTEMS ENGINEERING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.204650

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DENNIS ANGNER

Mailing Address 901 CENTER DRIVE

City State Zip Code
MOUNT PLEASANT MI 48858-4101

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

Name of Employer Occupation
ISABELLA BANK CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204634

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES BRASFIELD

Mailing Address 33 WILLIS RD.

City State Zip Code
SCOTTS VALLEY CA 95066-3415

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204606

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS. TRISHA CHILCUTT

Mailing Address 127 ROUTH

City State Zip Code
SAN ANTONIO TX 78209-4676

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

Name of Employer Occupation
SELF-EMPLOYED PROPERTY MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.204618

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
YAAKOV ELKON

Mailing Address 60 HUDSON STREET

City State Zip Code
NEW YORK NY 10013-3315

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

Name of Employer Occupation
GRAPHNET INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.204572

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 61 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LARRY HORSLEY

Mailing Address 6320 RAVENWOOD DR

City State Zip Code
LITHIA SPRINGS GA 30122-1432

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.204561

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

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

Mailing Address 6320 RAVENWOOD DR

City State Zip Code
LITHIA SPRINGS GA 30122-1432

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.204558

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GEORGE JOHNSON

Mailing Address 711 N BAKER DR

City State Zip Code
CANBY OR 97013-3324

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.204454

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 2100.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 62 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. WARREN J. KAPLAN

Mailing Address 15340 PEPPER LANE

City State Zip Code
SARATOGA CA 95070-6427

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TECH CONSULTANT SUNSET TECH CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204530

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204494

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204559

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
HENRY OLINDE

Mailing Address 1459 OAKLEY DRIVE

City State Zip Code
BATON ROUGE LA 70806-8620

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

Name of Employer Occupation
OLINDE & MERCER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.204533

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

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

Mailing Address 5110 CEDAR RIDGE DRIVE

City State Zip Code
LA GRANGE KY 40031-8960

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS REGISTERED NURSE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.204599

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
KAREN J PRITCHARD

Mailing Address P.O. BOX 227

City State Zip Code
NORTH AURORA IL 60542-0227

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
255.00

Transaction ID : SA17.204658

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 100.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 64 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DOROTHY SALWASSER

Mailing Address 415 S. DICKENSON AVE.

City State Zip Code
FRESNO CA 93706-9399

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

Name of Employer Occupation
SALWASSER FARMS FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.204420

Date of Receipt

M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

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

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

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

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
342.00

Transaction ID : SA17.204557

Date of Receipt

M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES L. BARKSDALE

Mailing Address 800 WOODLANDS PARKWAY, SUITE 118

City State Zip Code
RIDGELAND MS 39157-5200

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

Name of Employer Occupation
BARKSDALE MANAGEMENT OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Transaction ID : SA17.204900

Date of Receipt

M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

5000.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

Subtotal Of Receipts This Page (optional).....▶ 5150.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARC IVERSON

Mailing Address 5200 BEVINGTON PLACE

City CHARLOTTE State NC Zip Code 28277-5504

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

Name of Employer DISABLED Occupation DISABLED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.204690

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. TYLER M. JACKSON

Mailing Address 3475 N EL DORADO DR

City LONG BEACH State CA Zip Code 90808-3206

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204706

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BERNARD KIRK

Mailing Address 7030 E. FOOTHILL DR.

City PARADISE VALLEY State AZ Zip Code 85253-3192

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

Name of Employer KIRK INTERNATIONAL Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204700

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR STEVEN BRUCE KLINSKY

Mailing Address **787 7TH AVENUE
49TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10019-6018**

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

Name of Employer **NEW MOUNTAIN CAPITAL LLC** Occupation **MANAGING DIRECTOR, FOUNDER AND CEO**

Receipt For: 2016
 Primary General
 Other (specify) **2700.00**

Transaction ID : SA17.204904

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. PHILIP E. LEBHERZ

Mailing Address **1600 W. HILLSDALE BLVD.**

City **SAN MATEO** State **CA** Zip Code **94402-3768**

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

Name of Employer **LISI, INC.** Occupation **FOUNDER & C.E.O.**

Receipt For: 2016
 Primary General
 Other (specify) **2700.00**

Transaction ID : SA17.204898

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MRS. SHARON LEBHERZ

Mailing Address **1600 W. HILLSDALE BLVD.**

City **SAN MATEO** State **CA** Zip Code **94402-3768**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) **2700.00**

Transaction ID : SA17.204897

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **6400.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 70 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR MICHAEL J LEFFELL

Mailing Address 35 SHELDRAKE ROAD

City State Zip Code
SCARSDALE NY 10583-3409

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

Name of Employer Occupation
PORTAGE ADVISORS INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.204895

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MS. VICTORIA LONGFELLOW

Mailing Address 10265 E. CHOLLA ST.

City State Zip Code
SCOTTSDALE AZ 85260-6038

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

Name of Employer Occupation
LONGFELLOW LAW GROUP, PLLC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204701

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. CHRISTI ORDERS

Mailing Address 6333 N. CENTRAL AVE.

City State Zip Code
PHOENIX AZ 85012-1159

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204703

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 3200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 72 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DR. GENE WELLS RAY

Mailing Address 16136 EL CAMINO REAL

City State Zip Code
RANCHO SANTA FE CA 92091-4596

FEC ID number of contributing federal political committee.

Name of Employer Occupation
G.M.T. VENTURES L.L.C. MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204901

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DR. DONALD F. RICHEY

Mailing Address 503 STILSON CANYON ROAD

City State Zip Code
CHICO CA 95928-9119

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204896

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. MARY RICHEY

Mailing Address 503 STILSON CANYON ROAD

City State Zip Code
CHICO CA 95928-9119

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204892

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WIL GARLAND

Mailing Address 170 E. MAIN ST. D-274

City State Zip Code
HENDERSONVILLE TN 37075-2587

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

Name of Employer Occupation
AMERICAN CAPITAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.204760

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address 4420 SE 106TH ST

City State Zip Code
BELLEVIEW FL 34420-6835

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

Name of Employer Occupation
SPX FLOW POWER & ENERGY DIRECTOR, ENGINEERING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.204754

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address 415 PATTON COVE

City State Zip Code
BASTROP TX 78602-6641

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

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.204763

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 400.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 74 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

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

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.204769

Date of Receipt

M M / D D / Y Y Y Y
05 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

7.00

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

PATRICIA BARHAM

Mailing Address 2012 ROSEDOWN DR.

City State Zip Code
MONROE LA 71201-3083

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204862

Date of Receipt

M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

250.00

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

MR. DONALD P. BOGARD

Mailing Address 515 EAST VERMONT STREET

City State Zip Code
INDIANAPOLIS IN 46202-3637

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.204921

Date of Receipt

M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

400.00

Subtotal Of Receipts This Page (optional).....▶ 657.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. BETH LYNN BUCHANAN

Mailing Address 8280 E. ASTER DR.

City State Zip Code
SCOTTSDALE AZ 85260-5200

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THUNDERHEAD.COM SOFTWARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204841

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS JANEL DOMENICO

Mailing Address P.O. BOX 12472

City State Zip Code
DENVER CO 80212-0472

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNLOCKING POTENTIAL CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204840

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JEROME M. FULLINWIDER

Mailing Address 5500 PRESTON ROAD STE. 365

City State Zip Code
DALLAS TX 75205-2675

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED OIL & GAS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.204912

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JASON KLONOSKI

Mailing Address 4444 N. DROMEDARY RD.

City	State	Zip Code
PHOENIX	AZ	85018-2952

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204846

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 3070 SPEYERS RD

City	State	Zip Code
SELAH	WA	98942-9243

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204867

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. DIANA MERCER

Mailing Address 600 ROUE 25A

City	State	Zip Code
EAST SETAUKET	NY	11733-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOUSEWIFE	HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204923

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ROBERT LEROY MERCER

Mailing Address 600 ROUTE 25A

City EAST SETAUKET State NY Zip Code 11733-1235

FEC ID number of contributing federal political committee.

Name of Employer RENAISSANCE TECHNOLOGIES, LLC Occupation FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204929

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

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. ROBERT LEROY MERCER

Mailing Address 600 ROUTE 25A

City EAST SETAUKET State NY Zip Code 11733-1235

FEC ID number of contributing federal political committee.

Name of Employer RENAISSANCE TECHNOLOGIES, LLC Occupation FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219741

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

CONTRIBUTION

Amount of Each Receipt this Period

REFUNDED \$5,400.00 ON 06/30/2015

C. Full Name (Last, First, Middle Initial)
JAMES MIKESH

Mailing Address 251 CRAGMOR DRIVE

City CLINTON State IA Zip Code 52732-1339

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204875

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

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
TRAE NUNNINK

Mailing Address 430 W 58TH STREET

City State Zip Code
KC MO 64113-1240

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

Name of Employer Occupation
ACCESS ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.204864

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

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

Mailing Address 6775 BINGHAMTON ROAD

City State Zip Code
DIXON CA 95620-9641

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

Name of Employer Occupation
J.A.PITTO CO.,LLC ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.204859

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOHN PITTO

Mailing Address 6775 BINGHAMTON ROAD

City State Zip Code
DIXON CA 95620-9641

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

Name of Employer Occupation
J.A.PITTO CO.,LLC ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.204860

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 4200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WENDY R. RIDDELL

Mailing Address **6750 E. CAMELBACK RD.
SUITE #100**

City **SCOTTSDALE** State **AZ** Zip Code **85251-2020**

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

Name of Employer **BERRY RIDDELL & ROSENSTEEL** Occupation **FOUNDER/ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204843

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM L. SCONIERS

Mailing Address **419 E. MAIN STREET APT. 321**

City **HENDERSONVILLE** State **TN** Zip Code **37075-2763**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.204905

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
VICTOR STABIO

Mailing Address **HALLADOR ENERGY CO
379 COOK STREET**

City **DENVER** State **CO** Zip Code **80206-4422**

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

Name of Employer **HALLADOR ENERGY CO** Occupation **OIL AND GAS EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.204839

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **3150.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
M ELIZABETH WEISS

Mailing Address 1304 HAWTHORNE LANE

City State Zip Code
HINSDALE IL 60521-2956

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204850

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. DANIELLE WERSTLER

Mailing Address 8231 N. 74TH PLACE

City State Zip Code
SCOTTSDALE AZ 85258-2703

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

Name of Employer Occupation
PHILANTHROPIST INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.204844

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. JEAN D. ASHLEY

Mailing Address 1330 UNIVERSITY DRIVE APT. 22

City State Zip Code
MENLO PARK CA 94025-4241

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.205143

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 82 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOSEPH DE LA TORRE

Mailing Address 9185 MUIR WAY

City State Zip Code
GRANITE BAY CA 95746-9678

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

Name of Employer Occupation
STATE OF CALIFORNIA MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.00

Transaction ID : SA17.204988

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 73 PUUHONU PL

City State Zip Code
HILO HI 96720-2060

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
247.00

Transaction ID : SA17.204885

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ALBERT W. FOSTER

Mailing Address 20451 AUDETTE STREET

City State Zip Code
DEARBORN MI 48124-3907

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.205162

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ALYN HOLT

Mailing Address 10 HESSIAN WAY

City State Zip Code
CHERRY HILL NJ 08003-2615

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

Name of Employer Occupation
INTEST CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.204990

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. HOWARD

Mailing Address P.O. BOX 1527

City State Zip Code
SAN DIEGO CA 92067-1527

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

Name of Employer Occupation
JW HOWARD ATTORNEY'S LTD ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.204964

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. DON W. OLIPHANT

Mailing Address P.O. BOX 1651

City State Zip Code
RANCHO SANTA FE CA 92067-1651

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

Name of Employer Occupation
D.W.O. ENTERPRISES REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.205193

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3700.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 84 / 594

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. WARREN D. ORLOFF

Mailing Address 2107 OCEAN AVE. APT. 404

City	State	Zip Code
SANTA MONICA	CA	90405-2265

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205148

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. MARIO PICCONI

Mailing Address 17434 UTOPIA ROAD

City	State	Zip Code
SAN DIEGO	CA	92128-2214

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNIVERSITY OF SAN DIEGO	PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.204887

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. DAVID RAY

Mailing Address 4314 ARGENTINA CIRCLE

City	State	Zip Code
PASADENA	TX	77504-2502

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RAY-WRIGHT PUMPS,INC	VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205154

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. SUSAN CRAWFORD TRACY

Mailing Address P.O. BOX 1434

City State Zip Code
MEDINA TX 78055-1434

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.205110

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS E E. VOS

Mailing Address 32397 NOB HILL DR.

City State Zip Code
AVON MN 56310-9675

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.205158

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD FONTAINE WARREN

Mailing Address 386 BENT TWIG AVENUE

City State Zip Code
CAMARILLO CA 93012-5144

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

Name of Employer Occupation
A.T.T. GOVERNMENT SOLUTIONS ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.205179

Date of Receipt
MM / DD / YYYY
05 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 2900.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JAMES ASHLEY

Mailing Address 1928 E. HIGHLAND AVE

City State Zip Code
PHOENIX AZ 85016-4626

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

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.205043

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MRS. TESS R. BURLESON

Mailing Address 4557 E. VIALOS CEBALLOS

City State Zip Code
PHOENIX AZ 85028-

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.205121

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DR. KAREN G. CANULLAMD

Mailing Address 7835 N. 3RD WAY

City State Zip Code
PHOENIX AZ 85020-4052

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

Name of Employer Occupation
SELF-EMPLOYED PSYCHIATRIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.205122

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 2000.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. PAUL DELANEY

Mailing Address **2899 N. GARRETT LANE**

City **FLAGSTAFF** State **AZ** Zip Code **86001-7882**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.205117

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

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

Mailing Address **12 WETHERBEE CT**

City **PHOENIX** State **MD** Zip Code **21131-1600**

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

Name of Employer **CHARLES EMERGENCY PHYSICIANS** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.205004

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN JERVEY

Mailing Address **242 TIMBERLAND AVE**

City **LONGWOOD** State **FL** Zip Code **32750-6159**

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

Name of Employer **FEDEX** Occupation **PROGRAMMER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
222.00

Transaction ID : SA17.205006

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

Subtotal Of Receipts This Page (optional)..... **109.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
VINCENT P PIETSCH

Mailing Address **2276 SATURDAY ST**

City State Zip Code
NORTH PORT FL 34288-8531

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.205029

Date of Receipt
M M / D D / Y Y Y Y
05 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
KAREN J PRITCHARD

Mailing Address **P.O. BOX 227**

City State Zip Code
NORTH AURORA IL 60542-0227

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
255.00

Transaction ID : SA17.205028

Date of Receipt
M M / D D / Y Y Y Y
05 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
ROBERT RANKIN

Mailing Address **701 MERCER ROAD**

City State Zip Code
BUTLER PA 16001-1841

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.205016

Date of Receipt
M M / D D / Y Y Y Y
05 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional)..... **155.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 90 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. VIRGINIA A. SIMPSON

Mailing Address 6022 N. 51ST PLACE

City State Zip Code
PARADISE VALLEY AZ 85253-5144

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205120

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. JEANNE O. STERRETT

Mailing Address 8700 N. AVENIDA DEL SOL

City State Zip Code
PARADISE VALLEY AZ 85253-2148

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205118

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ADAM STOLINSKI

Mailing Address 9450 SW GEMINI DR

City State Zip Code
BEAVERTON OR 97008-7105

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205002

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 91 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
TERRY TAYLOR

Mailing Address 203 SHERWOOD DRIVE

City State Zip Code
LAURENS SC 29360-2639

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.205013

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 5909 COUSTEAU CT.

City State Zip Code
ELK GROVE CA 95758-4226

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.205045

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
KAREN A BLEDSOE

Mailing Address 700 NW GILMAN BLVD., #445

City State Zip Code
ISSAQUAH WA 98027-5395

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.205088

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 175.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 92 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KEITH BRADLEY

Mailing Address P.O. BOX 393

City State Zip Code
CHATHAM MA 02633-0393

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BROADMEADOW REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205314

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. BRUCE BRANDALEONE

Mailing Address 6040 OLD FIELD DRIVE

City State Zip Code
CHAPEL HILL NC 27514-8234

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205528

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
STEPHEN BYFIELD

Mailing Address 1225 E FM 1462

City State Zip Code
ROSHARON TX 77583-7874

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ENI US OPERATING INC SR ACCOUNTING AND REPORTING COORDINATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205405

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LINDA DAMIANO

Mailing Address 4425 N. SAWYER RD.

City State Zip Code
OCONOMOWOC WI 53066-3329

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.205357

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 14 WINCREST FALLS DR

City State Zip Code
CYPRESS TX 77429-5154

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1125.00

Transaction ID : SA17.205358

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
LISA GRACE-KELLOGG

Mailing Address 31220 LOBO CANYON ROAD

City State Zip Code
AGOURA HILLS CA 91301-3407

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

Name of Employer Occupation
AMERICAN PRINT MEDIA PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
616.00

Transaction ID : SA17.205300

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 94 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DANIEL GREENE

Mailing Address P.O. BOX 1232

City State Zip Code
ROSEVILLE CA 95678-8232

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED LAYMAN MISSIONARY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.205348

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 1201 S PRAIRIE AVE, APT 1405

City State Zip Code
CHICAGO IL 60605-3423

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NOMURA BANKING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.205096

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17.205373

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
313.00

Transaction ID : SA17.205526

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
35.00

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

Mailing Address 4113 WINDSOR PARKWAY

City State Zip Code
DALLAS TX 75205-1670

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

Name of Employer Occupation
SELF INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.205365

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
HENRY OLINDE

Mailing Address 1459 OAKLEY DRIVE

City State Zip Code
BATON ROUGE LA 70806-8620

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

Name of Employer Occupation
OLINDE & MERCER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.205339

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 85.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RONALD PETERSON

Mailing Address 30 EAST 51ST ST

City SAVANNAH State GA Zip Code 31405-2139

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

Name of Employer Occupation
BLUE CROSS BLUE SHIELD SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.205297

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 942 16TH AVENUE EAST

City SEATTLE State WA Zip Code 98112-3918

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
823.00

Transaction ID : SA17.205370

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

C. Full Name (Last, First, Middle Initial)
WILMA SINCLAIR

Mailing Address 764 SUTRO AVENUE

City NOVATO State CA Zip Code 94947-1950

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

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
342.00

Transaction ID : SA17.205398

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 88.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 97 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DENNY TODD

Mailing Address 7564 S. BRUCE ST.

City	State	Zip Code
LAS VEGAS	NV	89123-1525

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205402

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial)
MR. HUGH T. VERANO JR.

Mailing Address 30900 RANCHO VIEJO RD.

City	State	Zip Code
SAN JUAN CAPISTRAN	CA	92675-1762

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VERANO & VERNANO	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205260

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)
JOHN WYMER

Mailing Address 243 CHASTAIN COMMONS

City	State	Zip Code
ATLANTA	GA	30342-3615

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SHERMAN & HOWARD LLC	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205217

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 98 / 594

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JEFFREY ALEXANDER

Mailing Address 10041 HEYWOOD LN

City State Zip Code
HIGHLANDS RANCH CO 80130-8860

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

Name of Employer Occupation
CISCO SYSTEMS SYSTEMS ENGINEERING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.205508

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MS. VERNITA BOHANNON

Mailing Address 4272 WILD OAT WAY

City State Zip Code
ROSEVILLE CA 95747-8613

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.206034

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. RANDALL P. BORCHERDING

Mailing Address 155 RETIRO WAY

City State Zip Code
SAN FRANCISCO CA 94123-1216

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.205646

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1125.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 99 / 594

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEPHEN CAMPBELL

Mailing Address 2015 PASEO LARO

City	State	Zip Code
SAN CLEMENTE	CA	92673-5665

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.205577

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 500.00

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

Mailing Address 7198 JONES RD

City	State	Zip Code
BRYAN	TX	77807-9780

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Transaction ID : SA17.205595

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 100.00

C. Full Name (Last, First, Middle Initial)
MANFRED EIMER

Mailing Address 200 HARBOR DRIVE
UNIT 2501

City	State	Zip Code
SAN DIEGO	CA	92101-6857

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17.206039

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 200.00

Subtotal Of Receipts This Page (optional).....▶ _____ 800.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. LORNA J. GLADSTONE

Mailing Address 1161 CREST LANE

City State Zip Code
MCLEAN VA 22101-1805

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.206009

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL GREENE

Mailing Address P.O. BOX 1232

City State Zip Code
ROSEVILLE CA 95678-8232

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

Name of Employer Occupation
SELF-EMPLOYED LAYMAN MISSIONARY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.206023

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
FRANK HAKE

Mailing Address 4931 BONITA BAY BLVD.,

City State Zip Code
BONITA SPRINGS FL 34134-1705

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.205473

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DR. J. DANIEL HANKS JR.

Mailing Address 39 HUNTINGTON ROAD SW

City	State	Zip Code
ROME	GA	30165-6661

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205992

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND HENKEL

Mailing Address 4092 S. WABASH STREET

City	State	Zip Code
DENVER	CO	80237-1755

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205570

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)
MR. DAVID JAEGER

Mailing Address 27 GRAND MIRAMAR DR.

City	State	Zip Code
HENDERSON	NV	89011-2203

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206024

Date of Receipt

M M / D D / Y Y Y Y
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="200.00"/>

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. MARIO PICCONI

Mailing Address 17434 UTOPIA ROAD

City	State	Zip Code
SAN DIEGO	CA	92128-2214

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

Name of Employer	Occupation
UNIVERSITY OF SAN DIEGO	PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Transaction ID : SA17.205547

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

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

Mailing Address 702 RALFALLEN STREET

City	State	Zip Code
HOUSTON	TX	77008-4556

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

Name of Employer	Occupation
SELF	FREELANCE WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.205657

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 300.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID RAY

Mailing Address 4314 ARGENTINA CIRCLE

City	State	Zip Code
PASADENA	TX	77504-2502

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

Name of Employer	Occupation
RAY-WRIGHT PUMPS,INC	VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Transaction ID : SA17.205489

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

Subtotal Of Receipts This Page (optional).....▶ _____ 375.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. ALICE J. ROMERO

Mailing Address **1438 MERCED STREET**

City **RICHMOND** State **CA** Zip Code **94804-4922**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **0.00**

Transaction ID : SA17.220772A

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

25.00

CHARGED BACK \$25.00 ON 05/29/2015

B. Full Name (Last, First, Middle Initial)
MR. EDWARD SATTLER

Mailing Address **13089 HARDING AVENUE**

City **SAN MARTIN** State **CA** Zip Code **95046-9440**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Transaction ID : SA17.205694

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
RICHARD SHAFFER

Mailing Address **457 PEMBERTON RD**

City **KENNETT SQUARE** State **PA** Zip Code **19348-2293**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **400.00**

Transaction ID : SA17.205430

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

100.00

Subtotal Of Receipts This Page (optional).....▶

225.00

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

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ANNE SHEAHEN

Mailing Address 2017 WESTMINSTER COURT

City	State	Zip Code
MCKINNEY	TX	75070-6952

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOTCHKISS INSURANCE AGENCY, LLC	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205668

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. J. THOMAS STOEN

Mailing Address 44 POLO DRIVE

City	State	Zip Code
COLORADO SPRINGS	CO	80906-3144

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206084

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ADAM STOLINSKI

Mailing Address 9450 SW GEMINI DR

City	State	Zip Code
BEAVERTON	OR	97008-7105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205459

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RONALD PETERSON

Mailing Address 30 EAST 51ST ST

City SAVANNAH State GA Zip Code 31405-2139

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

Name of Employer Occupation
BLUE CROSS BLUE SHIELD SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.205777

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
VINCENT P PIETSCH

Mailing Address 2276 SATURDAY ST

City NORTH PORT State FL Zip Code 34288-8531

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.205776

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
KEITH BRADLEY

Mailing Address P.O. BOX 393

City CHATHAM State MA Zip Code 02633-0393

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

Name of Employer Occupation
BROADMEADOW REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.205857

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 125.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MIREILLE BUSER

Mailing Address 6132 COPPERHILL DRIVE

City State Zip Code
DALLAS TX 75248-4977

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

Name of Employer Occupation
NONE SOFTWARE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.205851

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS. LISA MCBEAN

Mailing Address 38 RUE FONTAINEBLEAU

City State Zip Code
NEWPORT BEACH CA 92660-5905

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

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
675.00

Transaction ID : SA17.205865

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JACQUELINE ANDERSON

Mailing Address 7925 BEN HOGAN DR

City State Zip Code
LAS VEGAS NV 89149-6611

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.205925

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 625.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DON ESTES

Mailing Address 1000 E ASH LN

City State Zip Code
EULESS TX 76039-4773

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.205917

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

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

Mailing Address P.O. BOX 240944

City State Zip Code
ANCHORAGE AK 99524-0944

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

Name of Employer Occupation
CONOCOPHILLIPS BUSINESS ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Transaction ID : SA17.205913

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

C. Full Name (Last, First, Middle Initial)
WILLIAM HAMMOCK

Mailing Address 51 FOREST AVENUE -- UNIT 93

City State Zip Code
OLD GREENWICH CT 06870-1538

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.205909

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 138.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

MR. WILLIAM P. MUMMA

Mailing Address 19 FRIAR TUCK CIRCLE

City State Zip Code
SUMMIT NJ 07901-3713

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

Name of Employer Occupation
BECKETT FUND FOR RELIGIOUS LIBERTY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.205915

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

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

ROBERT SEKLEMIAN

Mailing Address 4505 S UNIT 124

City State Zip Code
DENVER CO 80237-

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

Name of Employer Occupation
RITIED GEOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Transaction ID : SA17.205932

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

MR. C. NICHOLAS ANTICH

Mailing Address 2165 SPYGLASS HILL

City State Zip Code
CENTER VALLEY PA 18034-8938

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

Name of Employer Occupation
A D COMPEILER CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.206267

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 3050.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. SCOTT M. JONES

Mailing Address **575 REDWOOD HIGHWAY
SUITE 200**

City **MILL VALLEY** State **CA** Zip Code **94941-3047**

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

Name of Employer **GENERAL STEAMSHIP AGENCIES** Occupation **SHIPPING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.206405

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. NEIL W. KUNKEL

Mailing Address **21 POPLAR HILL ROAD**

City **LOUISVILLE** State **KY** Zip Code **40207-1172**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.206227

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL E. KYLE

Mailing Address **9903 COLONY ROAD**

City **FAIRFAX** State **VA** Zip Code **22030-1811**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.206397

Date of Receipt
M M / D D / Y Y Y Y
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1750.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. STUART R. LEVINE

Mailing Address 100 JERICHO QUADRANGLE STE. 111

City	State	Zip Code
JERICHO	NY	11753-2702

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
STUART LEVINE & ASSOCIATES, LLC	CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206225

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

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

Mailing Address P.O. BOX

City	State	Zip Code
CELINA	TX	75009-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUNBELT TELECOMMUNICATIONS (RETIRED)	RETIRED TELECOM INDUSTRY (SUNBELT)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206089

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial)
MRS. CYNTHIA MIRSKY

Mailing Address 25331 DERBYHILL DRIVE

City	State	Zip Code
LAGUNA HILLS	CA	92653-7836

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PACIFIC RIM CAPITAL, INC.	CO-OWNER/DIRECTOR SPECIAL EVENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206249

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CROSBY NORBECK

Mailing Address 1515 OAKDALE UNIT 9

City HOUSTON State TX Zip Code 77004-5986

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

Name of Employer UNIT PETROLEUM COMPANY Occupation GEOPHYSICIST

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date 300.00

Transaction ID : SA17.206109

Date of Receipt
MM / DD / YYYY
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID J. OVEN

Mailing Address P.O. BOX 1466

City ENID State OK Zip Code 73702-1466

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

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date 240.00

Transaction ID : SA17.206245

Date of Receipt
MM / DD / YYYY
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
MR. LARRY REGALADO

Mailing Address 90 E. LAS FLORES DRIVE

City ALTADENA State CA Zip Code 91001-4854

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

Name of Employer LOS ANGELES COUNTY Occupation HEALTH INSPECTOR

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date 250.00

Transaction ID : SA17.206295

Date of Receipt
MM / DD / YYYY
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... 260.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS SHIRLEY SPELLERBERG

Mailing Address 3621 LYNCHBURG DRIVE

City	State	Zip Code
DENTON	TX	76208-5329

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206377

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 2434 BEACON FOREST DR.

City	State	Zip Code
CHARLOTTE	NC	28270-2262

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TAYLOR PROPERTIES GROUP, LLC	COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.205961

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. JANE L. THOMAS

Mailing Address 4416 BEVERLY DRIVE

City	State	Zip Code
DALLAS	TX	75205-3002

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206414

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOHN A. VICKERS

Mailing Address **23757 BURTON STREET**

City State Zip Code
CANOGA PARK CA 91304-5703

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.206412

Date of Receipt
M M / D D / Y Y Y Y
05 26 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. DIANA S. WILLIAMS

Mailing Address **1901 GOLFVIEW DRIVE**

City State Zip Code
URBANA IL 61801-1114

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

Name of Employer Occupation
SELF FUND RAISER,INTERIOR DESIGNER,ART & AN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.206250

Date of Receipt
M M / D D / Y Y Y Y
05 26 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MADELEINE BLOT

Mailing Address **565 PARK AVENUE**

City State Zip Code
NEW YORK NY 10065-7344

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
413.00

Transaction ID : SA17.206519

Date of Receipt
M M / D D / Y Y Y Y
05 27 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **850.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
AGATHA CAYIA

Mailing Address 3895 SE 20 ST

City	State	Zip Code
OCALA	FL	34471-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206533

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 161 SAUSAL DR

City	State	Zip Code
PORTOLA VALLEY	CA	94028-7941

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206425

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. RICHARD FREYMAN

Mailing Address 5349 HUMBOLDT DR.

City	State	Zip Code
ROCKLIN	CA	95765-4815

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SARA LEE CORP.	MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206155

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JILL GERBER

Mailing Address 493 PALMER RD

City LUDOWICI State GA Zip Code 31316-6217

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

Name of Employer N/A Occupation HOME MAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 250.00

Transaction ID : SA17.206147

Date of Receipt
MM / DD / YYYY
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address 15 WEST 72ND STREET

City NEW YORK State NY Zip Code 10023-3402

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

Name of Employer ESTE LAUDER COMPANIES Occupation GROUP PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 500.00

Transaction ID : SA17.206156

Date of Receipt
MM / DD / YYYY
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PAUL JOHNSON

Mailing Address 4031 MISCHIRE DR

City HOUSTON State TX Zip Code 77025-4023

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 600.00

Transaction ID : SA17.206515

Date of Receipt
MM / DD / YYYY
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DONALD KAMMER

Mailing Address 7509 CROSS GATE LN

City	State	Zip Code
ALEXANDRIA	VA	22315-4621

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
US	MILITARY RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206502

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 8020 SUNSCAPE LANE

City	State	Zip Code
FORT WORTH	TX	76123-1950

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206501

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BRUCE NADEAU

Mailing Address 4943 PARK RD

City	State	Zip Code
CHARLOTTE	NC	28209-3574

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
V-STAX, LLC	TECHNOLOGY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206160

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOSEPH PARADIS

Mailing Address **2302 GULF SHORE BOULEVARD NORTH**

City **NAPLES** State **FL** Zip Code **34103-4353**

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

Name of Employer **BRAMCO, INC.** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.206508

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
KAREN J PRITCHARD

Mailing Address **P.O. BOX 227**

City **NORTH AURORA** State **IL** Zip Code **60542-0227**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 255.00

Transaction ID : SA17.206489

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

C. Full Name (Last, First, Middle Initial)
SHAUN SHAYA

Mailing Address **494 W LINCOLN**

City **BIRMINGHAM** State **MI** Zip Code **48009-1962**

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

Name of Employer **SELF EMPLOYED** Occupation **MANUFACTURER'S REPRESENTATIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.206474

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1275.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PHILIP SISSON

Mailing Address 5010 LARNO DRIVE

City	State	Zip Code
ALEXANDRIA	VA	22310-1238

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.206517

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

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

Mailing Address 52 REEDER LANE

City	State	Zip Code
NEW CANAAN	CT	06840-3009

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

Name of Employer	Occupation
SELF-EMPLOYED	ENERGY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.206445

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2700.00

C. Full Name (Last, First, Middle Initial)
SHERRARD WALLINGFORD

Mailing Address 25 COVENTRY CT

City	State	Zip Code
PRAIRIE VILLAGE	KS	66208-5226

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

Name of Employer	Occupation
NA	NA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 263.00

Transaction ID : SA17.206521

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 2825.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KAREN A BLEDSOE

Mailing Address 700 NW GILMAN BLVD., #445

City	State	Zip Code
ISSAQUAH	WA	98027-5395

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206828

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 6189 N. BLOSSER AVE.

City	State	Zip Code
FRESNO	CA	93711-1608

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
STATE OF CALIFORNIA	ASSOCIATE SAFETY ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206855

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL CHENG

Mailing Address 143-26 41ST AVE

City	State	Zip Code
FLUSHING	NY	11355-1806

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EPOS DEVELOPMENT	REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.206562

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) JAMES DAY Mailing Address 176 WOODLAND DR. City VISTA State CA Zip Code 92083-7738 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 250.00		Transaction ID : SA17.206853 Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2015 CONTRIBUTION Amount of Each Receipt this Period 250.00
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B. Full Name (Last, First, Middle Initial) BLAKE DEVITT Mailing Address 3215 W. GULF DR. E-102 City SANIBEL State FL Zip Code 33957-5651 FEC ID number of contributing federal political committee. C Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 204.00		Transaction ID : SA17.206913 Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2015 CONTRIBUTION Amount of Each Receipt this Period 25.00
---	--	---

C. Full Name (Last, First, Middle Initial) MICHAEL DUPONT Mailing Address 3920 E. NORA CIRCLE City MESA State AZ Zip Code 85215-1077 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 350.00		Transaction ID : SA17.206747 Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2015 CONTRIBUTION Amount of Each Receipt this Period 100.00
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Subtotal Of Receipts This Page (optional).....▶ **375.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BEN ENIS

Mailing Address 1231 PANINI DR.

City	State	Zip Code
HENDERSON	NV	89052-3143

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

Name of Employer	Occupation
ENISENERGEN	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.206728

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address 1307 HACKBERRY LANE

City	State	Zip Code
WINNETKA	IL	60093-1607

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

Name of Employer	Occupation
SELF	WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 213.00

Transaction ID : SA17.206912

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 13.00

C. Full Name (Last, First, Middle Initial)
RICHARD GILLIAM

Mailing Address PO BOX 820

City	State	Zip Code
KESWICK	VA	22947-0820

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

Name of Employer	Occupation
CUMBERLAND DEVELOPMENT	MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.206880

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2700.00

Subtotal Of Receipts This Page (optional).....▶ _____ 3713.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GUY A. GOTTSCHALK

Mailing Address 412 DALY AVENUE

City State Zip Code
WISCONSIN RAPIDS WI 54494-4744

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

Name of Employer Occupation
GOTTSCHALK CRANBERRY, INC. FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.206632

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 305 E 19TH ST.

City State Zip Code
COSTA MESA CA 92627-2348

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

Name of Employer Occupation
FIELDPIECE INSTRUMENTS SALES AND MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Transaction ID : SA17.206844

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER HICKS

Mailing Address 444 WOODWICK CT.

City State Zip Code
CINCINNATI OH 45255-3658

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

Name of Employer Occupation
CHORUS CONSULTING / SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.206744

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1025.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARINE HIRSCHFELD

Mailing Address 413 CARRIAGE DRIVE

City: SEQUIM State: WA Zip Code: 98382-9711

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

Name of Employer: NONE Occupation: PERFORMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.206636

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address 6344 BAY RIDGE DRIVE

City: PETOSKEY State: MI Zip Code: 49770-8453

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.206555

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
JOHN JERVEY

Mailing Address 242 TIMBERLAND AVE

City: LONGWOOD State: FL Zip Code: 32750-6159

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

Name of Employer: FEDEX Occupation: PROGRAMMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 222.00

Transaction ID : SA17.206827

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

Subtotal Of Receipts This Page (optional).....▶ _____ 625.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. LESLIE F. GILLIAM

Mailing Address P.O. BOX 820

City State Zip Code
KESWICK VA 22947-0820

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

Name of Employer Occupation
CUMBERLAND DEVELOPMENT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.206978

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

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

Mailing Address 607 LOUGHMOR PASS

City State Zip Code
WELDON SPRING MO 63304-0506

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207031

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MARGERIE KESKIN

Mailing Address 6010 DROTT DRIVE

City State Zip Code
EAST SYRACUSE NY 13057-

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

Name of Employer Occupation
STATEWIDE AQUASTORE, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207006

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. EMILY KINNIER

Mailing Address 350 E. TAYLOR STREET, APT 6201

City State Zip Code
SAN JOSE CA 95112-3157

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

Name of Employer Occupation
CISCO SYSTEMS, INC. TECHNICAL WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.206959

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 118 BLACKLAND RD.

City State Zip Code
ATLANTA GA 30342-4410

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

Name of Employer Occupation
PEL VENTURES VC

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.206987

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARTHA MCKINNON

Mailing Address 91 EDGERSTOUNE RD

City State Zip Code
PRINCETON NJ 08540-6713

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

Name of Employer Occupation
NA RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207046

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 550.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PEG STANDISH

Mailing Address 5404 ST. EMILION CT

City State Zip Code
COLLEYVILLE TX 76034-5577

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

Name of Employer Occupation
ADVANCED-ONLINE OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.207115

Date of Receipt
MM / DD / YYYY
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

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

Mailing Address 1501 N. STATE PARKWAY

City State Zip Code
CHICAGO IL 60610-1676

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207153

Date of Receipt
MM / DD / YYYY
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CLIFFORD DIBBLE

Mailing Address 5129 164TH AVE SE

City State Zip Code
BELLEVUE WA 98006-5703

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

Name of Employer Occupation
MICROSOFT CORP PROGRAM MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.207182

Date of Receipt
MM / DD / YYYY
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5900.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN ROTHERT

Mailing Address 175 1ST AVE S

City State Zip Code
NAPLES FL 34102-5946

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.207132

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 184 N. GLADE AVE.

City State Zip Code
ELMHURST IL 60126-2512

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

Name of Employer Occupation
DANAHER CORP PATENT ATTY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207179

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHARLES STENCEL

Mailing Address 7 DORCHESTER COURT

City State Zip Code
SUGAR GROVE IL 60554-4139

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

Name of Employer Occupation
SERENITY PACKAGING CORPORATION BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.207122

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN DIPASQUALE

Mailing Address **4 BAR CHASE TRAIL**

City **LONGVIEW** State **TX** Zip Code **75605-7206**

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

Name of Employer **LEADING EDGE MEDICAL ASSOCIATES** Occupation **PHYSICIAN EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.207330

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

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

Mailing Address **1991 RT 206**

City **SOUTHAMPTON** State **NJ** Zip Code **08088-9503**

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

Name of Employer **ARTISTIC LANDSCAPING** Occupation **SELF EMPLOYEES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.207328

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
GERALD GEORGE

Mailing Address **1530 W PORT AU PRINCE LN**

City **PHOENIX** State **AZ** Zip Code **85023-5107**

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

Name of Employer **SELF** Occupation **INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207338

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ **1750.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GEORGE LACY

Mailing Address 1055 HEDGEROSE LANE

City State Zip Code
ROSWELL GA 30075-1897

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207282

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 3121 MARKLE RD.

City State Zip Code
NORRISTOWN PA 19403-4168

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

Name of Employer Occupation
SELF EMPLOYED PAINTING CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207336

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313.00

Transaction ID : SA17.207299

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
35.00

Subtotal Of Receipts This Page (optional).....▶ 635.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RON MARTIN

Mailing Address 1742 PEACOCK LANE

City State Zip Code
FULLERTON CA 92833-2244

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

Name of Employer Occupation
SELF EMPLOYED INFORMATION SCIENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.207284

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 11812 BREADFRUIT LANE

City State Zip Code
VENICE FL 34292-3834

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

Name of Employer Occupation
US ARMY SOLDIER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.207283

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
PAULA NICHOLS

Mailing Address 3010 S COMPTON

City State Zip Code
ST. LOUIS MO 63118-1221

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207373

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 575.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARTHA PAULISSIAN

Mailing Address 3848 WINFORD DRIVE

City	State	Zip Code
TARZANA	CA	91356-5823

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Transaction ID : SA17.207237

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

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

Mailing Address 38795 S WOODLAND RD

City	State	Zip Code
CHAGRIN FALLS	OH	44022-6821

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

Name of Employer	Occupation
NT RUDDOCK CO	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207361

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
FRANK SUITS

Mailing Address 4545 COSMOS HILL ROAD

City	State	Zip Code
CORTLAND	NY	13045-9186

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

Name of Employer	Occupation
SUITKOTE CORPORATION	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.207380

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 5400.00

SEE REATTRIBUTION

Subtotal Of Receipts This Page (optional).....▶ _____ 5950.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
FRANK SUITS

Mailing Address 4545 COSMOS HILL ROAD

City State Zip Code
CORTLAND NY 13045-9186

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

Name of Employer Occupation
SUITKOTE CORPORATION OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.207380B

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

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

Mailing Address 4545 COSMOS HILL ROAD

City State Zip Code
CORTLAND NY 13045-9186

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

Name of Employer Occupation
PROJECT C.U.R.E. PHILANTHROPIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.214782

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
TOM W. JOHNSON

Mailing Address 7881 COCOBAY DR

City State Zip Code
NAPLES FL 34108-6510

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.207342

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT WOODARD

Mailing Address **69 LEDGEBROOK LANE**

City **MIDDLETOWN** State **CT** Zip Code **06457-2116**

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

Name of Employer **ENERGYSOLUTIONS INC** Occupation **DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207350

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address **8414 OXFORD CHASE CIRCLE NW**

City **MASSILLON** State **OH** Zip Code **44646-7871**

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

Name of Employer **THE DAVEY TREE EXPERT COMPANY** Occupation **EXECUTIVE MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207423

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. JOANNE M. ALTER

Mailing Address **41 PACIFIC MIST**

City **NEWPORT COAST** State **CA** Zip Code **92657-1649**

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

Name of Employer **SALES & MARKETING** Occupation **VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2600.00

Transaction ID : SA17.207655

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2600.00

Subtotal Of Receipts This Page (optional)..... **3350.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. PAMELA F. BELLAMY

Mailing Address 369 BELVEDERE STREET

City State Zip Code
LA JOLLA CA 92037-5308

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207652

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD L. BERGER

Mailing Address 10900 SHADY TRAIL

City State Zip Code
DALLAS TX 75220-1308

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

Name of Employer Occupation
BERGER ENGINEERING COMPANY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1026.00

Transaction ID : SA17.207542

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. ZACHARY CALDWELL

Mailing Address 7017 TUSCANY WAY

City State Zip Code
EL DORADO HILLS CA 95762-5410

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

Name of Employer Occupation
GODGIVEN FIRST AMENDMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.207494

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 2200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WINNIE CHWA

Mailing Address 8625 DE ADALENA STREET

City State Zip Code
ROSEMEAD CA 91770-

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

Name of Employer Occupation
PARSONS COST ESTIMATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207426

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. COLZANI

Mailing Address 106 AYALA COURT

City State Zip Code
LOS GATOS CA 95032-

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

Name of Employer Occupation
ANDREINI & COMPANY INSURANCE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207605

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD L. CRUSE

Mailing Address 958 EDGEWOOD DRIVE NW

City State Zip Code
ALBANY OR 97321-1392

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207603

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1000.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DOUG EAMES

Mailing Address 1385 WEST COACH ROAD

City State Zip Code
BOULDER CO 80302-9475

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207492

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 500 EAST 77 STREET

City State Zip Code
NYC NY 10162-0025

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

Name of Employer Occupation
SELF-EMPLOYED AUTHOR; EU POLITICIAN; COMMENTATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.220832

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

REFUND TO BE ISSUED REFUNDED \$125.00 ON 06/30/2015

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA A. FAORO

Mailing Address 10451 DEERFOOD DRIVE

City State Zip Code
GREAT FALLS VA 22066-3416

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

Name of Employer Occupation
NONE NONE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207435

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 475.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOHN FEHSENFELD

Mailing Address P.O. BOX 35200

City State Zip Code
LAS VEGAS NV 89133-5200

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207501

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES J. GABBERT

Mailing Address 123 SECOND STREET

City State Zip Code
SAUSALITO CA 94965-2526

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

Name of Employer Occupation
NEXT CENTURY ENTERPRISES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207433

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRIAN HENDRICKS

Mailing Address 7316 HATTON CROSS

City State Zip Code
WILLIAMSBURG VA 23188-6377

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

Name of Employer Occupation
NOKIA HEAD OF TECHNOLOGY POLICY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207411

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

MR. KENNETH L. KHACHIGIAN

Mailing Address 501 W. LOBOS MARINOS

City State Zip Code
SAN CLEMENTE CA 92672-

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BROWNSTEIN, HYATT, FARBER & SCHRECK ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207601

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

CONGRESSMA ERNEST L. KONNYU

Mailing Address 14920 COLE DRIVE

City State Zip Code
SAN JOSE CA 95124-4314

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KONNYU TAX HELP RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207654

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

MR. BENNETT THOMAS LEBHERZ

Mailing Address 1435 LEXINGTON AVENUE

City State Zip Code
SAN MATEO CA 94402-3812

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LISI GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207653

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. MARC T. LITTLE

Mailing Address 445 SOUK FIGUEROA STREET #2600

City State Zip Code
LOS ANGELES CA 90021-

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207657

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. HENRY MASSEY

Mailing Address 27741 VIA CERRO GORDO

City State Zip Code
LOS ALTOS HILLS CA 94022-3267

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207510

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. TROY MEDLEY

Mailing Address 31816 VIA PERDIZ

City State Zip Code
COTO DE CAZA CA 92679-4180

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

Name of Employer Occupation
PERSONAL CARE PHYSICIANS CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207656

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 2500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JAMES STEPHEN QUINN

Mailing Address **369 BELVEDERE STREET**

City **LA JOLLA** State **CA** Zip Code **92037-5308**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.207650

Date of Receipt
 M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address **701 MERCER ROAD**

City **BUTLER** State **PA** Zip Code **16001-1841**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.207416

Date of Receipt
 M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
PATRICIA REIGSTAD

Mailing Address **4 AUGUSTA NATIONAL DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-6132**

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

Name of Employer **SELF-EMPLOYED** Occupation **WRITER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.207562

Date of Receipt
 M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 200.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1300.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JEROME E. ROBERTSON

Mailing Address 1464 TOPAR AVENUE

City State Zip Code
LOS ALTOS CA 94024-5957

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207498

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL ROVZAR

Mailing Address 26001 VIA ARBOLEDA

City State Zip Code
SAN JUAN CAPISTRAN CA 92675-3038

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

Name of Employer Occupation
PALOMA MEDICAL PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207515

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR EDWARD P SWYER

Mailing Address THE SWYER COMPANIES INC
10 EXECUTIVE PARK DRIVE

City State Zip Code
ALBANY NY 12203-3716

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

Name of Employer Occupation
THE SWYER COMPANIES INC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207546

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1350.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ROBERT E. YOUNGER

Mailing Address **2236 CENTURY HILL**

City **LOS ANGELES** State **CA** Zip Code **90067-3505**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207481

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. PETER M. ZUBER

Mailing Address **1180 ASHMOUNT AVENUE**

City **PIEDMONT** State **CA** Zip Code **94610-1207**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207439

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MICHAEL BAXLEY

Mailing Address **4056 PRAIRIE LANE**

City **BETTENDORF** State **IA** Zip Code **52722-7214**

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

Name of Employer **PRIVATE** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.207668

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ **550.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
TOM BERGLUND

Mailing Address 4818 PARK GLEN RD

City	State	Zip Code
MINNEAPOLIS	MN	55416-5702

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

Name of Employer	Occupation
BERGLUND MARKETING	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.207600

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 1000.00

B. Full Name (Last, First, Middle Initial)
MR. BRUCE H. BRANYAN

Mailing Address 16856 S. HIGHLAND RIDGE DRIVE

City	State	Zip Code
VILLAGE OF LOCH LL	MO	64012-

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207630

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 500.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL S. EGAN

Mailing Address P.O. BOX 029006

City	State	Zip Code
FORT LAUDERDALE	FL	33302-9006

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

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207648

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 500.00

Subtotal Of Receipts This Page (optional).....▶

_____ 2000.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. BARBARA HILTY

Mailing Address 3300 N.E. 36TH STREET APT. 1520

City State Zip Code
FORT LAUDERDALE FL 33308-

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207646

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 35 PIERREPONT STREET

City State Zip Code
BROOKLYN NY 11201-3359

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

Name of Employer Occupation
NOT EMPLOYED HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.207596

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address 415 PATTON COVE

City State Zip Code
BASTROP TX 78602-6641

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

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.207751

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

Subtotal Of Receipts This Page (optional).....▶ 2009.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. MAUREEN S. PERRY

Mailing Address **6847 N.W. 28TH WAY**

City State Zip Code
FORT LAUDERDALE FL 33309-1325

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207647

Date of Receipt
M M / D D / Y Y Y Y
06 02 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JAY L. PETERS

Mailing Address **3811 DARWIN ROAD**

City State Zip Code
DURHAM NC 27707-5307

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

Name of Employer Occupation
DURHAM TECHNICAL COMMUNITY COLLEGE PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207614

Date of Receipt
M M / D D / Y Y Y Y
06 02 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RICK RICHMAN

Mailing Address **217 BURLINGAME AVE.**

City State Zip Code
LOS ANGELES CA 90049-3702

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

Name of Employer Occupation
SELF LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207712

Date of Receipt
M M / D D / Y Y Y Y
06 02 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1250.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR N. RYAN

Mailing Address 119 MT. PLEASANT AVENUE

City GLOUCESTER State MA Zip Code 01930-4500

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17.207641

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 942 16TH AVENUE EAST

City SEATTLE State WA Zip Code 98112-3918

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 823.00

Transaction ID : SA17.207692

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 270.00

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. SMITH

Mailing Address 6441 SURFSIDE WAY

City SACRAMENTO State CA Zip Code 95831-1029

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Transaction ID : SA17.207627

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 100.00

Subtotal Of Receipts This Page (optional)..... 1370.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JACK WAGNER

Mailing Address 83 ROLLING MEADOW LANE

City	State	Zip Code
EAST AMHERST	NY	14051-1807

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

Name of Employer	Occupation
INRACKS, INC.	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207678

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 3331 OAKDELL ROAD

City	State	Zip Code
STUDIO CITY	CA	91604-4139

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

Name of Employer	Occupation
SELF	REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.207737

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
BARRY WOLFE

Mailing Address 22578 FLAMINGO STREET

City	State	Zip Code
WOODLAND HILLS	CA	91364-4916

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

Name of Employer	Occupation
SELF	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.207589

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2700.00

Subtotal Of Receipts This Page (optional).....▶ _____ 3700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BUDDY FESTERLING

Mailing Address 73 PUUHONU PL

City HILO State HI Zip Code 96720-2060

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
247.00

Transaction ID : SA17.207771

Date of Receipt
MM / DD / YYYY
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

B. Full Name (Last, First, Middle Initial)
MS. GEORGETTE GELBARD

Mailing Address 4712 PARK ENCINO LANE #321

City ENCINO State CA Zip Code 91436-3273

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

Name of Employer Occupation
SELF-EMPLOYED PUBLIC RELATIONS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.207783

Date of Receipt
MM / DD / YYYY
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BETSY GODFREY

Mailing Address 300 S. INTERLACHEN AV.

City WINTER PARK State FL Zip Code 32789-4473

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

Name of Employer Occupation
GODFREY DESIGN CONSULTANTS INTERIOR DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.207784

Date of Receipt
MM / DD / YYYY
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1109.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL HOUSTON

Mailing Address **1121 E CENTRAL AVE**

City **HEMET** State **CA** Zip Code **92543-6134**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Transaction ID : SA17.207786

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 300.00

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

Mailing Address **2077 ZUERN DR**

City **HARTFORD** State **WI** Zip Code **53027-8877**

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

Name of Employer **E-IMAGEDATA CORP.** Occupation **VP ENGINEERING**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Transaction ID : SA17.227378

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MR. TOM LOVE

Mailing Address **10601 N. PENNSYLVANIA AVENUE**

City **OKLAHOMA CITY** State **OK** Zip Code **73120-4108**

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

Name of Employer **LOVES TRAVEL STOPS** Occupation **BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Transaction ID : SA17.207813

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 2700.00

Subtotal Of Receipts This Page (optional)..... **3100.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JIM MCMANUS JR.

Mailing Address **88 CHESTNUT ST**

City **WESTON** State **MA** Zip Code **02493-1533**

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

Name of Employer **SELF** Occupation **COMM. REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) **1200.00**

Transaction ID : SA17.227567

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

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

Mailing Address **3848 WINFORD DRIVE**

City **TARZANA** State **CA** Zip Code **91356-5823**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) **275.00**

Transaction ID : SA17.207770

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
RICHARD PETERSON

Mailing Address **1600 FIRESTONE PKWY**

City **AKRON** State **OH** Zip Code **44301-1659**

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

Name of Employer **RICHARDS FENCE** Occupation **FENCE**

Receipt For: 2016
 Primary General
 Other (specify) **500.00**

Transaction ID : SA17.227553

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **1550.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ALLEN C. SHEPARD JR.

Mailing Address 2375 JACKSON STREET

City State Zip Code
SAN FRANCISCO CA 94115-

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207804

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="300.00"/>

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

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207817

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

C. Full Name (Last, First, Middle Initial)
JACQUELINE ANDERSON

Mailing Address 7925 BEN HOGAN DR

City State Zip Code
LAS VEGAS NV 89149-6611

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227444

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KEITH BRADLEY

Mailing Address P.O. BOX 393

City State Zip Code
CHATHAM MA 02633-0393

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

Name of Employer Occupation
BROADMEADOW REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.207957

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

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

Mailing Address 215 CORONADO DRIVE

City State Zip Code
KERRVILLE TX 78028-3814

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.227560

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD BRYAN

Mailing Address 3207 S YORKTOWN AVE

City State Zip Code
TULSA OK 74105-2230

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.227540

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 725.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHELLE DORMAN

Mailing Address 2550 SOUTH COLUMBINE STREET

City State Zip Code
DENVER CO 80210-6117

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

Name of Employer Occupation
NONE COMMUNITY VOLUNTEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227546

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. DEREK DRAPER

Mailing Address 29416 GARDENWAY DRIVE

City State Zip Code
LAGUNA NIGUEL CA 92677-

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

Name of Employer Occupation
WELLS FARGO ADVISORS INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.207895

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STEVEN EINHORN

Mailing Address 115 CENTRAL PARK WEST

City State Zip Code
NEW YORK NY 10023-4198

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

Name of Employer Occupation
OMEGA ADVISORS PORTFOLIO MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.227558

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN O. ENANDER

Mailing Address 1400 CASEY KEY ROAD

City State Zip Code
NOKOMIS FL 34275-3366

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227178

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 12 WETHERBEE CT

City State Zip Code
PHOENIX MD 21131-1600

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

Name of Employer Occupation
CHARLES EMERGENCY PHYSICIANS PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.207913

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
DON ESTES

Mailing Address 1000 E ASH LN

City State Zip Code
EULESS TX 76039-4773

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207848

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JANIS FITZGERALD

Mailing Address 4834 ELKHORN HILL DR

City SUWANEE State GA Zip Code 30024-4148

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.227413

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 620 E 20th St

City HOUSTON State TX Zip Code 77008

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

Name of Employer BECK REDDEN LLP Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA05052015INK2

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

INKIND - POSTAGE

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
KAYE GALLOWAY

Mailing Address 3420 FM 1461

City MCKINNEY State TX Zip Code 75071-3029

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

Name of Employer SELF Occupation REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
525.00

Transaction ID : SA17.207917

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3300.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SIDNEY GILLIGAN

Mailing Address 4840 S THREE FOUNTAINS DR #171

City	State	Zip Code
MURRAY	UT	84107-5073

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207893

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DANIEL J GORMAN

Mailing Address 403 N. INTERLACHEN AVENUE

City	State	Zip Code
WINTER PARK	FL	32789-3202

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227438

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MICHAEL GREENAMYRE

Mailing Address 16 LIMIT STREET

City	State	Zip Code
LEAVENWORTH	KS	66048-4600

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.207896

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
HENRY HAGER

Mailing Address 15281 KILBIRNIE DRIVE

City State Zip Code
FORT MYERS FL 33912-2420

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.227481

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 5454 LA SIERRA DR

City State Zip Code
DALLAS TX 75231-2350

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

Name of Employer Occupation
SELF ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
310.99

Transaction ID : SA17.227421

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JUDITH KANE

Mailing Address 14 PINEHURST LANE

City State Zip Code
FALMOUTH ME 04105-1161

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

Name of Employer Occupation
SELF PAINTER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.227568

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
OLIVER KLINGER

Mailing Address 10828 BRENNER CREEK COURT

City State Zip Code
HOUSTON TX 77079-7300

FEC ID number of contributing federal political committee.

Name of Employer Occupation
OILDOM PUBLISHING CO. PUBLISHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227433

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

Mailing Address 3610 EL JAMES DRIVE

City State Zip Code
SPRING TX 77388-5027

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GOODRICH OPERATING CO., INC. CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227388

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JUSTIN MAGRUDER

Mailing Address 11404 FAIRFAX DRIVE

City State Zip Code
GREAT FALLS VA 22066-1308

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NOETIC PARTNERS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227545

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL MCCONNELL

Mailing Address 2480 COWPER ST

City State Zip Code
PALO ALTO CA 94301-4216

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

Name of Employer Occupation
STANFORD LAW SCHOOL PROFESSOR OF LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.227549

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
300.00

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

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

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

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.207868

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
BILL MURPHY

Mailing Address 2461 NW COUNTY ROAD 4071

City State Zip Code
FROST TX 76641-3480

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.227401

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 425.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PAUL NEUHOFF

Mailing Address 2918 MARSHALL BLVD

City State Zip Code
SULLIVANS ISLAND SC 29482-9637

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

Name of Employer Occupation
GSP MARKETING TECHNOLOGIES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.207897

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 9857 RAVARI DR.

City State Zip Code
CYPRESS CA 90630-3554

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.226433

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MICHAEL NOLAN

Mailing Address 31 CLINTON AVENUE

City State Zip Code
MONTCLAIR NJ 07042-2128

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

Name of Employer Occupation
JP MORGAN SECURITIES INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.227559

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 625.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RICHARD ODOM

Mailing Address 2333 STAFFORD RD

City THOUSAND OAKS State CA Zip Code 91361-5061

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.227437

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID RAY

Mailing Address 4314 ARGENTINA CIRCLE

City PASADENA State TX Zip Code 77504-2502

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

Name of Employer RAY-WRIGHT PUMPS,INC Occupation VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.227065

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
THOMAS ROSS

Mailing Address 114 ROLLING GREEN PLACE

City MISSOULA State MT Zip Code 59803-2435

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

Name of Employer US ARMY (RETIRED) Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.227556

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 650.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL SHAW

Mailing Address 1030 SWINKS MILL RD

City State Zip Code
MC LEAN VA 22102-2161

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

Name of Employer Occupation
REFERENTIAL SYSTEMS, LLC MAINFRAME SOFTWARE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
800.00

Transaction ID : SA17.227557

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 203 SHERWOOD DRIVE

City State Zip Code
LAURENS SC 29360-2639

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.207877

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
FRANK TRILLA

Mailing Address 6255 S. CASS

City State Zip Code
WESTMONT IL 60559-2613

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

Name of Employer Occupation
VILLAGE OF WILLOWBROOK MAYOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.227555

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1100.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address 13611 DEERING BAY DRIVE

City State Zip Code
CORAL GABLES FL 33158-2839

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.227391

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS E E. VOS

Mailing Address 32397 NOB HILL DR.

City State Zip Code
AVON MN 56310-9675

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227137

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
DAVID A WILLIAMS

Mailing Address 2001 HALLUM ST

City State Zip Code
CLOVIS NM 88101-8685

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

Name of Employer Occupation
WILLIAMS INSURANCE LLC INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.227085

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GREG WOOD

Mailing Address 19222 MAYALL STREET

City NORTHBRIDGE State CA Zip Code 91324-1256

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227547

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

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

Mailing Address 6506 PATRICK DRIVE

City DALLAS State TX Zip Code 75214-2527

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1400.00

Transaction ID : SA17.207832

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT E. YOUNGER

Mailing Address 2236 CENTURY HILL

City LOS ANGELES State CA Zip Code 90067-3505

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.227443

Date of Receipt
MM / DD / YYYY
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MATTHEW ZERBEL

Mailing Address 1012 LIONS PARK DR

City State Zip Code
ST JOSEPH MI 49085-1021

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

Name of Employer Occupation
LENK TRANSPORTATION INC TRANSPORTATION BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227126

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 26 TIMBERHILL DR

City State Zip Code
SEWICKLEY PA 15143-8911

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

Name of Employer Occupation
TIVERSA CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.207979

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES BOLLENBACHER

Mailing Address 132 SCHOONER LANE

City State Zip Code
BARRINGTON IL 60010-1538

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

Name of Employer Occupation
MASTEC VP ENVIRONMENT HEALTH SAFETY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.208177

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 800.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BETH J PICKELSIMER

Mailing Address **547 CARDINAL DRIVE**

City **BREVARD** State **NC** Zip Code **28712-4264**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.227489

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. JEAN PITZO

Mailing Address **24 ROSEWOOD DRIVE**

City **HAWTHORN WOODS** State **IL** Zip Code **60047-7713**

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

Name of Employer **ACE METAL CRAFTS COMPANY** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208042

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PAMELA POLACEK

Mailing Address **6348 STEPHENS XING**

City **MECHANICSBURG** State **PA** Zip Code **17050-2352**

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

Name of Employer **MCNEES WALLACE & NURICK LLC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208172

Date of Receipt
M M / D D / Y Y Y Y
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **1100.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
HENRY SALZHAUER

Mailing Address **589 BROADWAY**

City	State	Zip Code
NYC	NY	10012-3231

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

Name of Employer	Occupation
BENJAMIN PARTNERS	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Transaction ID : SA17.207989

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 150.00

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

Mailing Address **1640 PINON GLEN**

City	State	Zip Code
COLORADO SPRINGS	CO	80919-3344

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

Name of Employer	Occupation
BRIDGE ENERGY	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.208079

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
ROBERT EINHAUS

Mailing Address **7639 HUNTMASER LANE**

City	State	Zip Code
MCLEAN	VA	22102-2531

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

Name of Employer	Occupation
RETIRED	BANKING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17.208371

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 750.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
FRED M FERRERIA

Mailing Address 20026 E SUPERSTITION DR

City State Zip Code
QUEEN CREEK AZ 85142-9758

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

Name of Employer Occupation
CROWN PEST, LLC OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1150.00

Transaction ID : SA17.208435

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

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

Mailing Address 170 E. MAIN ST. D-274

City State Zip Code
HENDERSONVILLE TN 37075-2587

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

Name of Employer Occupation
AMERICAN CAPITAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.208281

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GUY A. GOTTSCHALK

Mailing Address 412 DALY AVENUE

City State Zip Code
WISCONSIN RAPIDS WI 54494-4744

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

Name of Employer Occupation
GOTTSCHALK CRANBERRY, INC. FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.208284

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN JERVEY

Mailing Address **242 TIMBERLAND AVE**

City State Zip Code
LONGWOOD FL 32750-6159

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

Name of Employer Occupation
FEDEX PROGRAMMER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
222.00

Transaction ID : SA17.208346

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

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

Mailing Address **242 TIMBERLAND AVE**

City State Zip Code
LONGWOOD FL 32750-6159

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

Name of Employer Occupation
FEDEX PROGRAMMER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
222.00

Transaction ID : SA17.208454

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GEORGE JOHNSON

Mailing Address **711 N BAKER DR**

City State Zip Code
CANBY OR 97013-3324

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.208256

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional)..... **138.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RON JOHNSON

Mailing Address **81 MARLAND ROAD SOUTH**

City State Zip Code
COLORADO SPRINGS CO 80906-4348

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

Name of Employer Occupation
CENTRAL BANCORP CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.208321

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address **9501 CEDAR CREST DRIVE**

City State Zip Code
AUSTIN TX 78750-2724

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.00

Transaction ID : SA17.208331

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

C. Full Name (Last, First, Middle Initial)
BRUCE NADEAU

Mailing Address **4943 PARK RD**

City State Zip Code
CHARLOTTE NC 28209-3574

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

Name of Employer Occupation
V-STAX, LLC TECHNOLOGY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.208298

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **613.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BOB TAYLOR

Mailing Address 2434 BEACON FOREST DR.

City State Zip Code
CHARLOTTE NC 28270-2262

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

Name of Employer Occupation
TAYLOR PROPERTIES GROUP, LLC COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.208358

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN CRISAFULLI

Mailing Address 9888 WAPLES STREET

City State Zip Code
SAN DIEGO CA 92121-2921

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

Name of Employer Occupation
BEHIND THE SCENES INC. BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.208476

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
GAIL GALLEHER

Mailing Address P.O. BOX 240944

City State Zip Code
ANCHORAGE AK 99524-0944

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

Name of Employer Occupation
CONOCOPHILLIPS BUSINESS ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Transaction ID : SA17.208472

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

Subtotal Of Receipts This Page (optional).....▶ 363.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL MILLER

Mailing Address 6015 PONDEROSA WAY

City State Zip Code
LAS VEGAS NV 89118-2706

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

Name of Employer Occupation
U.S. CUSTOMS & BORDER PROTECTION OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208561

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
260.00

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

Mailing Address 1104 RIO CIDADE WAY

City State Zip Code
SACRAMENTO CA 95831-4470

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.208597

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BARBARA RUCKER

Mailing Address 922 LAKE DRIVE

City State Zip Code
BEDFORD VA 24523-1314

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

Name of Employer Occupation
VIRGINIA COMMONWEALTH UNIVERSITY SIGNAGE COORDINATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.208491

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 960.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
TOM & JEANNE VOGEL

Mailing Address 2974 THOUSAND OAKS STREET

City State Zip Code
BILLINGS MT 59102-0763

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

Name of Employer Occupation
SELF OWNER AGRICULTURAL RETLATED BUSINI

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.227563

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 5909 COUSTEAU CT.

City State Zip Code
ELK GROVE CA 95758-4226

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.208529

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
SHERRARD WALLINGFORD

Mailing Address 25 COVENTRY CT

City State Zip Code
PRAIRIE VILLAGE KS 66208-5226

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

Name of Employer Occupation
NA NA

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
263.00

Transaction ID : SA17.208499

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 575.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ORMAN WILSON

Mailing Address **6411 LINDYANN LANE**

City **HOUSTON** State **TX** Zip Code **77008-3233**

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

Name of Employer **CLEANCAR LLC** Occupation **CAR WASH OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208534

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address **1308 RHODE ISLAND AVE NW**

City **WASHINGTON** State **DC** Zip Code **20005-3710**

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

Name of Employer **FORTHRIGHT STRATEGY, INC.** Occupation **FUNDRAISING COUNSEL**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.208666

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. CARMINE BILARDELLO

Mailing Address **21347 HARROW COURT**

City **BOCA RATON** State **FL** Zip Code **33433-7453**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208797

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **2000.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MADELEINE BLOT

Mailing Address 565 PARK AVENUE

City State Zip Code
NEW YORK NY 10065-7344

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
413.00

Transaction ID : SA17.208708

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
313.00

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

Mailing Address 15455 N. DALLAS PKWY.

City State Zip Code
ADDISON TX 75001-4690

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

Name of Employer Occupation
CHAPWOOD INVESTMENTS, LLC MANAGING PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.208628

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. HARVEY FREUNDLICH

Mailing Address 6157 BALBOA CIRCLE UNIT 104

City State Zip Code
BOCA RATON FL 33433-8127

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208793

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 4013.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. DEBORAH GASLOW

Mailing Address **2659 SPANISH RIVER ROAD**

City	State	Zip Code
BOCA RATON	FL	33432-8132

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

Name of Employer	Occupation
SMART SOURCE, LLC	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.208796

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MS. STEPHANIE M. HANSON

Mailing Address **P.O. BOX 9295**

City	State	Zip Code
AVON	CO	81620-9203

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208744

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMBASSADOR BRENDA L. JOHNSON

Mailing Address **19 E. 72ND STREET**

City	State	Zip Code
NEW YORK	NY	10021-4145

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.211688

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **4200.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. NICK SEARCY

Mailing Address **813 N. PASS AVENUE**

City **BURBANK** State **CA** Zip Code **91505-2702**

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

Name of Employer **SELF-EMPLOYED** Occupation **ACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.208677

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address **304 FREVERT DRIVE**

City **FAYETTE** State **MO** Zip Code **65248-8728**

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

Name of Employer **INOVATIA LABORATORIES, LLC** Occupation **OWNER/OPERATOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208630

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. BERNICE WENGER

Mailing Address **450 S. EAST 5TH AVENUE**

City **BOCA RATON** State **FL** Zip Code **33432-5519**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208791

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **1250.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DOUGALL AGAN

Mailing Address **27422 PORTOLA PKWY**

City **FOOTHILL RANCH** State **CA** Zip Code **92610-2831**

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

Name of Employer **STIRLING CAPITAL INVESTMENTS** Occupation **LAND DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Transaction ID : SA17.208823

Date of Receipt
 M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2000.00

B. Full Name (Last, First, Middle Initial)
MRS. JENNIFER ARUNDALE

Mailing Address **647 CAMINO DE LOS MARES
SUITE 108-93**

City **SAN CLEMENTE** State **CA** Zip Code **92673-2825**

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

Name of Employer **KORN FERRY** Occupation **MANAGING CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.208938

Date of Receipt
 M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
MR. STEVE AVOYER

Mailing Address **5950 FOLSOM DRIVE**

City **LA JOLLA** State **CA** Zip Code **92037-7325**

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

Name of Employer **FLOCKE-AVOYER COMMERCIAL REAL ESTATE** Occupation **COMMERCIAL REAL ESTATE BROKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 513.00

Transaction ID : SA17.208939

Date of Receipt
 M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ **3000.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. JENNIFER P. DAVIDSON

Mailing Address 9 STYLE DRIVE

City ALISO VIEJO State CA Zip Code 92656-8090

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208828

Date of Receipt
MM / DD / YYYY
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS. JENNIFER DURAN

Mailing Address 8 OFFSHORE

City NEWPORT COAST State CA Zip Code 92657-2163

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208840

Date of Receipt
MM / DD / YYYY
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS. JENNIFER DURAN

Mailing Address 8 OFFSHORE

City NEWPORT COAST State CA Zip Code 92657-2163

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.228223A

Date of Receipt
MM / DD / YYYY
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

CHARGED BACK \$500.00 ON 06/18/2015

Subtotal Of Receipts This Page (optional).....▶ 1500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. KELLI ELLIS

Mailing Address 55 GOLF RIDGE DRIVE

City State Zip Code
TRABUCO CANYON CA 92679-3801

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

Name of Employer Occupation
SELF-EMPLOYED INTERIOR DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208943

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DR. PETER C. FARRELL

Mailing Address 7220 ROMERO DRIVE

City State Zip Code
LA JOLLA CA 92037-5633

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

Name of Employer Occupation
RESMED CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.208832

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. JORDAN FISHER

Mailing Address 33 CALLE VIVIANA

City State Zip Code
SAN CLEMENTE CA 92673-7049

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

Name of Employer Occupation
TPG IT CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.208944

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 2500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. BRIAN S. KINKAID

Mailing Address 1107 SOUTH MONROE STREET

City State Zip Code
DENVER CO 80210-2118

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

Name of Employer Occupation
SELF-EMPLOYED COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.208838

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SIGNE KIM LAURIDSEN-JONES

Mailing Address 6305 LAKE SHORE DRIVE

City State Zip Code
OKOBOJI IA 51355-5010

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.208936

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MR. EVERETT LEBHERZ

Mailing Address 291 ACACIA LANE

City State Zip Code
ALAMO CA 94507-1301

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

Name of Employer Occupation
EVCO INSURANCE SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208833

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 5000.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

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

MR. GEORGE L. LINDEMANN

Mailing Address 505 S. FLAGLER DRIVE STE. 900

City State Zip Code
WEST PALM BEACH FL 33401-5948

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208926

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

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

MRS. KASIA MAYS

Mailing Address 34145 PACIFIC COAST HIGHWAY

City State Zip Code
DANA POINT CA 92629-2808

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

Name of Employer Occupation
SELF-EMPLOYED DIRECTOR OF ALOA-ENERGY BEVERAGE PRODU

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.208945

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

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

DR. MONI MOSHARAF

Mailing Address 27068 LA PAZ ROAD

City State Zip Code
ALISO VIEJO CA 92656-3041

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

Name of Employer Occupation
SELF-EMPLOYED DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.208826

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 4500.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. REGAN MUSGROVE

Mailing Address 25 SUMMER MEADOWS COURT

City ALAMO State CA Zip Code 94507-1356

FEC ID number of contributing federal political committee.

Name of Employer LISI, INC. Occupation RIE MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.208835

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. CAREL NOLET JR.

Mailing Address 30 JOURNEY

City ALISO VIEJO State CA Zip Code 92656-3317

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.208946

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DOUGLAS PETERSON

Mailing Address 27470 HICKORY BLVD

City BONITA SPRINGS State FL Zip Code 34134-8409

FEC ID number of contributing federal political committee.

Name of Employer 3 DIMENSIONAL Occupation OFFICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.208849

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. ROSE MARIE ROYSTER

Mailing Address 2234 6TH AVENUE

City State Zip Code
SAN DIEGO CA 92101-2107

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

Name of Employer Occupation
SELF-EMPLOYED CONVENTION MANAGER/INDEPENDENT CC

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
209.00

Transaction ID : SA17.208951

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD SATTLER

Mailing Address 13089 HARDING AVENUE

City State Zip Code
SAN MARTIN CA 95046-9440

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.208916

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR LARRY W SONSINI

Mailing Address 370 MT. HOME COURT

City State Zip Code
WOODSIDE CA 94062-2559

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

Name of Employer Occupation
WILSON SONSINI ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.208952

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
5400.00

SEE REATTRIBUTION

Subtotal Of Receipts This Page (optional).....▶ 5800.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. HUGH T. VERANO JR.

Mailing Address 30900 RANCHO VIEJO RD.

City	State	Zip Code
SAN JUAN CAPISTRAN	CA	92675-1762

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VERANO & VERNANO	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1100.00

Transaction ID : SA17.208834

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT T. WAYMAN

Mailing Address 26220 MOODY ROAD

City	State	Zip Code
LOS ALTOS HILLS	CA	94022-4303

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Transaction ID : SA17.208932

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN WHITE

Mailing Address 31378 JULIANA FARMS ROAD

City	State	Zip Code
SAN JUAN CAPISTRAN	CA	92675-8301

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AVB BRAND SOURCE	EVP MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17.208825

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 1000.00

Subtotal Of Receipts This Page (optional)..... 4700.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEPHEN DANA

Mailing Address 9072 HILVERSON AVE

City State Zip Code
LAS VEGAS NV 89148-2646

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

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.208993

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 60 HUDSON STREET

City State Zip Code
NEW YORK NY 10013-3315

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

Name of Employer Occupation
GRAPHNET INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.209028

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN FOWLER

Mailing Address 10338 CR 312

City State Zip Code
LLANO TX 78643-

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

Name of Employer Occupation
SELF RETIRED ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.227564

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 650.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RUSSELL HARJU

Mailing Address 305 E 19TH ST.

City State Zip Code
COSTA MESA CA 92627-2348

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

Name of Employer Occupation
FIELDPIECE INSTRUMENTS SALES AND MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Transaction ID : SA17.208954

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

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

Mailing Address 3121 MARKLE RD.

City State Zip Code
NORRISTOWN PA 19403-4168

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

Name of Employer Occupation
SELF EMPLOYED PAINTING CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.209069

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

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

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.209010

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

Subtotal Of Receipts This Page (optional).....▶ 134.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
VINCENT P PIETSCH

Mailing Address 2276 SATURDAY ST

City State Zip Code
NORTH PORT FL 34288-8531

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.208991

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

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

Mailing Address 611 GRAMMONT STREET

City State Zip Code
MONROE LA 71201-7516

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

Name of Employer Occupation
GI CLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.208965

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILMA SINCLAIR

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

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

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
342.00

Transaction ID : SA17.209064

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

Subtotal Of Receipts This Page (optional).....▶ 159.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address 13611 DEERING BAY DRIVE

City State Zip Code
CORAL GABLES FL 33158-2839

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.209016

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

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

Mailing Address 243 CHASTAIN COMMONS

City State Zip Code
ATLANTA GA 30342-3615

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

Name of Employer Occupation
SHERMAN & HOWARD LLC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.209039

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GEORGE ABRAHAM

Mailing Address 151 HAWTHORNE AVE

City State Zip Code
GLEN RIDGE NJ 07028-2126

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

Name of Employer Occupation
TELTECH SYSTEMS CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.209125

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KURT ALLEN

Mailing Address 320 KIRKWOOD ROAD

City State Zip Code
MILLERSVILLE MD 21108-2534

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

Name of Employer Occupation
QUANTUM SPATIAL VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.209331

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

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

Mailing Address 5 OVAL COURT

City State Zip Code
BRONXVILLE NY 10708-1412

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

Name of Employer Occupation
ATAYAN INC MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.209129

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
RICHARD BLAKEMORE

Mailing Address 2951 QUAIL HOLLOW DR

City State Zip Code
FAIRFIELD CA 94534-8305

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.209408

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1125.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DANIEL BORING

Mailing Address 60593 EAST EAGLE RIDGE DRIVE

City	State	Zip Code
TUCSON	AZ	85739-5945

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

Name of Employer	Occupation
RETIRED	POLICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.209258

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address 2159 KEATS DR.

City	State	Zip Code
PENSACOLA	FL	32503-5896

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NONE	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.209302

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
HAROLD CHAFIN

Mailing Address 1357 43RD AVE

City	State	Zip Code
GREELEY	CO	80634-2449

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.209274

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1350.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SUSIE HOELLER

Mailing Address 2845 DEVONOAK BLVD

City	State	Zip Code
LAND O LAKES	FL	34638-4368

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOELLER LAW FIRM	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.209291

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
PHILIP JAMES

Mailing Address 10003 ROBINDALE COURT

City	State	Zip Code
GREAT FALLS	VA	22066-1848

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NATL GLASS ASSN	ASSN EXECUTUVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.209264

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JEFF JENSON

Mailing Address 705 AMERICANA DR, #22

City	State	Zip Code
ANNAPOLIS	MD	21403-3187

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NA	NA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.209212

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			11			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JAMES JOHN LIAUTAUD

Mailing Address 108 ANDROS ROAD

City State Zip Code
KEY LARGO FL 33037-5204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JIMMY JOHN'S INC CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.209205

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
LETTY LUTZKER

Mailing Address 408 SOUTH 2ND ST

City State Zip Code
BANGOR PA 18013-2514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IMAGING CONSULTANTS OF ESSEX PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.209339

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JANET MCINTOSH

Mailing Address 7784 E. 7TH AVE.

City State Zip Code
DENVER CO 80230-6111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUSBAND HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.209375

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3700.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN W BARNHART JR

Mailing Address 5700 4TH ST. N.

City	State	Zip Code
SAINT PETERSBURG	FL	33703-2216

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JWB MANAGEMENT GROUP, INC.	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.209553

Date of Receipt
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BILL BEYER

Mailing Address 257 BLACKSTRAP ROAD

City	State	Zip Code
FALMOUTH	ME	04105-2412

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	FORMER CEO OF A SAVINGS BANK

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.210131

Date of Receipt
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
PRISCILLA BROWN

Mailing Address 730 THOMAS ROAD

City	State	Zip Code
PHILADELPHIA	PA	19118-4601

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AXA	CMO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.210070

Date of Receipt
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KENNETH LOVE

Mailing Address 3503 WESTELM CT.

City State Zip Code
RICHMOND TX 77406-2986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GAR CO. D/B/A COPPER STATE RUBBER, INC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.209822

Date of Receipt
MM / DD / YYYY
06 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
DAVID R LUNDQUIST

Mailing Address 41-980 KAKAINA STREET

City State Zip Code
WAIMANALO HI 96795-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HH HOLDINGS INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.209425

Date of Receipt
MM / DD / YYYY
06 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DR. CHARLES S. MUNGER JR.

Mailing Address 1423 HAMILTON AVENUE

City State Zip Code
PALO ALTO CA 94301-3150

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE PHYSICIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211610

Date of Receipt
MM / DD / YYYY
06 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 4700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GERRY STERLING

Mailing Address 631 WEST RD

City State Zip Code
NEW CANAAN CT 06840-2514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ARTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.209579

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID ADANTE

Mailing Address 8414 OXFORD CHASE CIRCLE NW

City State Zip Code
MASSILLON OH 44646-7871

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE DAVEY TREE EXPERT COMPANY EXECUTIVE MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.210484

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KAREN A BLEDSOE

Mailing Address 700 NW GILMAN BLVD., #445

City State Zip Code
ISSAQUAH WA 98027-5395

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.210500

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 550.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RICHARD BRYAN

Mailing Address **3207 S YORKTOWN AVE**

City	State	Zip Code
TULSA	OK	74105-2230

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
N/A	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 700.00

Transaction ID : SA17.210685

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
KATHRYN A CARTER

Mailing Address **585 COUNTY ROAD 4164**

City	State	Zip Code
PITTSBURG	TX	75686-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NORTHEAST TEXAS COMMUNITY COLLEGE	PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.210609

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
JAMES CISTONE

Mailing Address **881 ABBOTTSTOWN PIKE**

City	State	Zip Code
HANOVER	PA	17331-8206

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SULLIVAN AVIATION SERVICES, LLC	AVIATION CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.210317

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 850.00

Total This Period (last page this line number only).....▶ _____

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOSEPH DE LA TORRE

Mailing Address 9185 MUIR WAY

City	State	Zip Code
GRANITE BAY	CA	95746-9678

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
STATE OF CALIFORNIA	MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 213.00

Transaction ID : SA17.210388

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 63.00

B. Full Name (Last, First, Middle Initial)
DON ESTES

Mailing Address 1000 E ASH LN

City	State	Zip Code
EULESS	TX	76039-4773

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.210611

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
JOHN FITZGERALD

Mailing Address 113 TUTTLE AVE

City	State	Zip Code
SPRING LAKE	NJ	07762-1535

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RET.	RET.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.210280

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 613.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GAIL GALLEHER

Mailing Address P.O. BOX 240944

City ANCHORAGE State AK Zip Code 99524-0944

FEC ID number of contributing federal political committee. **C**

Name of Employer CONOCOPHILLIPS Occupation BUSINESS ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Transaction ID : SA17.210644

Date of Receipt
MM / DD / YYYY
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
31.00

B. Full Name (Last, First, Middle Initial)
SIDNEY GILLIGAN

Mailing Address 4840 S THREE FOUNTAINS DR #171

City MURRAY State UT Zip Code 84107-5073

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
219.00

Transaction ID : SA17.210634

Date of Receipt
MM / DD / YYYY
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
FRANK HAKE

Mailing Address 4931 BONITA BAY BLVD.,

City BONITA SPRINGS State FL Zip Code 34134-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.210608

Date of Receipt
MM / DD / YYYY
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

Subtotal Of Receipts This Page (optional).....▶ 231.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM HAMMOCK

Mailing Address 51 FOREST AVENUE -- UNIT 93

City State Zip Code
OLD GREENWICH CT 06870-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.210379

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
PATRICK HOGAN

Mailing Address 19 HATTIE LANE

City State Zip Code
BILLERICA MA 01821-3503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED SECURITY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.210437

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
PRICE JETT

Mailing Address 40 NEABSCO DRIVE

City State Zip Code
FREDERICKSBURG VA 22405-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214012

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DEREK MAGNETTE

Mailing Address **27 MAPLE ST #4**

City State Zip Code
CAMBRIDGE MA 02139-1115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF THE BOSS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211380A

Date of Receipt
M M / D D / Y Y Y Y
06 13 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

CHARGED BACK \$50.00 ON 06/15/2015

B. Full Name (Last, First, Middle Initial)
PAULA MANN

Mailing Address **P.O. BOX**

City State Zip Code
CELINA TX 75009-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SUNBELT TELECOMMUNICATIONS RETIRED TELECOM INDUSTRY (SUNBELT)

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.210542

Date of Receipt
M M / D D / Y Y Y Y
06 13 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DAVID MATTHEW

Mailing Address **11812 BREADFRUIT LANE**

City State Zip Code
VENICE FL 34292-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US ARMY SOLDIER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.210552

Date of Receipt
M M / D D / Y Y Y Y
06 13 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional)..... **200.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PAUL MCCULLOUGH

Mailing Address 1334 JACOBSEN BLVD

City State Zip Code
BREMERTON WA 98310-5432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.210550

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address 415 PATTON COVE

City State Zip Code
BASTROP TX 78602-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.210533

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
PAUL NEUHOFF

Mailing Address 2918 MARSHALL BLVD

City State Zip Code
SULLIVANS ISLAND SC 29482-9637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GSP MARKETING TECHNOLOGIES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.210392

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 2825.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARIAN NISHI

Mailing Address 9857 RAVARI DR.

City State Zip Code
CYPRESS CA 90630-3554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.210399

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
HENRY OLINDE

Mailing Address 1459 OAKLEY DRIVE

City State Zip Code
BATON ROUGE LA 70806-8620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OLINDE & MERCER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.210489

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DARIA PANNESI

Mailing Address 1497 MASS AVE

City State Zip Code
ARLINGTON MA 02476-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF STRUT N PUP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211379A

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

CHARGED BACK \$50.00 ON 06/15/2015

Subtotal Of Receipts This Page (optional).....▶ 400.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RONALD PETERSON

Mailing Address 30 EAST 51ST ST

City SAVANNAH State GA Zip Code 31405-2139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLUE CROSS BLUE SHIELD SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.210587

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
GINO RONCELLI

Mailing Address 330 W DUARTE RD

City MONROVIA State CA Zip Code 91016-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RONCELLI PLASTICS CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.210472

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ALEXANDER ROOKS

Mailing Address 44 KENMORE RD

City BELMONT State MA Zip Code 02478-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EXECUTIVE PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211381A

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

CHARGED BACK \$50.00 ON 06/15/2015

Subtotal Of Receipts This Page (optional).....▶ 650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DOROTHY SALWASSER

Mailing Address 415 S. DICKENSON AVE.

City	State	Zip Code
FRESNO	CA	93706-9399

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SALWASSER FARMS	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.210703

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ROBERT SEKLEMIAN

Mailing Address 4505 S UNIT 124

City	State	Zip Code
DENVER	CO	80237-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RITIED	GEOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.210417

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
LAUREN J SEYMOUR

Mailing Address 110B N. JASPER AVE.

City	State	Zip Code
MARGATE CITY	NJ	08402-1512

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BORGATA HOTEL, CASINO & SPA	IT BUSINESS SOLUTIONS ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.210327

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LINDA SMITH

Mailing Address 1095 MAPLE HILL LANE

City	State	Zip Code
MALVERN	PA	19355-2340

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SALES RESEARCH GROUP	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1525.00

Transaction ID : SA17.210628

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN F. STEWART

Mailing Address 91-1068 WAIKAPOO ST

City	State	Zip Code
EWA BEACH	HI	96706-6463

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	ARMY MG/BUSINESS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17.210477

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
BOB TAYLOR

Mailing Address 2434 BEACON FOREST DR.

City	State	Zip Code
CHARLOTTE	NC	28270-2262

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TAYLOR PROPERTIES GROUP, LLC	COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 325.00

Transaction ID : SA17.210733

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			13			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 100.00

Subtotal Of Receipts This Page (optional)..... 1600.00

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES WRIGHT

Mailing Address 6506 PATRICK DRIVE

City State Zip Code
DALLAS TX 75214-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Transaction ID : SA17.210421

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
O BRUCE COFFMAN

Mailing Address 1020 LABARRE STREET

City State Zip Code
MANDEVILLE LA 70448-4212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICA'S MORTGAGE RESOURCE, INC. MORTGAGE BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.210803

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLEM DE VOGEL

Mailing Address 115 CHARLIE HILL RD

City State Zip Code
MILLERTON NY 12546-4454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224663

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MAUREEN DEAL

Mailing Address 10739S PLEASANT GROVE RD

City State Zip Code
INVERNESS FL 34452-9072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOANDEPOT/MORTGAGE MASTER MORTGAGE UNDERWRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.210948

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
BLAKE DEVITT

Mailing Address 3215 W. GULF DR.
E-102

City State Zip Code
SANIBEL FL 33957-5651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
204.00

Transaction ID : SA17.210879

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BUDDY FESTERLING

Mailing Address 73 PUUHONU PL

City State Zip Code
HILO HI 96720-2060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
247.00

Transaction ID : SA17.210805

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

Subtotal Of Receipts This Page (optional).....▶ 213.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHEAL FRANSSSEN

Mailing Address 780 MAUD AVENUE

City State Zip Code
SAN LEANDRO CA 94577-5244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UC BERKELEY-MECHANICAL ENGINEERING TECHNICAL INSTRUCTOR-MECHANICAL EN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224662

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. BRADLEY HASTINGS

Mailing Address 54 KENMORE RD

City State Zip Code
BELMONT MA 02478-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CRATE-ESCAPE.COM SELF EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211377A

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

CHARGED BACK \$50.00 ON 06/15/2015

C. Full Name (Last, First, Middle Initial)
JOANNA HEMMERLING

Mailing Address 1395 RIDGE WAY

City State Zip Code
PASADENA CA 91106-4513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHILANTHROPIST /WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.210802

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 800.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND HENKEL

Mailing Address 4092 S. WABASH STREET

City State Zip Code
DENVER CO 80237-1755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.211039

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
GEORGE JOHNSON

Mailing Address 711 N BAKER DR

City State Zip Code
CANBY OR 97013-3324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.210833

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
WILLIAM DOUGLAS LEWIS

Mailing Address 1249 PEACHTREE BATTLE AVE NW

City State Zip Code
ATLANTA GA 30327-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED FROM LUCENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224440

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 275.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)

BILL MURPHY

Mailing Address 2461 NW COUNTY ROAD 4071

City	State	Zip Code
FROST	TX	76641-3480

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
N/A	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Transaction ID : SA17.211029

Date of Receipt

M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

MARTHA PAULISSIAN

Mailing Address 3848 WINFORD DRIVE

City	State	Zip Code
TARZANA	CA	91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 275.00

Transaction ID : SA17.210819

Date of Receipt

M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)

MR. JOHN PECK JR.

Mailing Address P.O. BOX 829

City	State	Zip Code
RANCHO SANTA FE	CA	92067-0829

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PECK ENTERPRISES	REAL ESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Transaction ID : SA17.211008

Date of Receipt

M M / D D / Y Y Y Y
06 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶

2875.00

Total This Period (last page this line number only).....▶

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DENNY TODD

Mailing Address **7564 S. BRUCE ST.**

City	State	Zip Code
LAS VEGAS	NV	89123-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 425.00

Transaction ID : SA17.210898

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			14			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

B. Full Name (Last, First, Middle Initial)
L THOMAS WILLIAMS JR

Mailing Address **2020 BRUCK ST**

City	State	Zip Code
COLUMBUS	OH	43207-2329

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FRANKLIN INTERNATIONAL	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.224704

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			14			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
DANIEL BORING

Mailing Address **60593 EAST EAGLE RIDGE DRIVE**

City	State	Zip Code
TUCSON	AZ	85739-5945

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	POLICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.211174

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1125.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. MARCIE BUTTERS

Mailing Address 6962 NW 66TH WAY

City State Zip Code
PARKLAND FL 33067-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.211691

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MARK BYERS

Mailing Address 5746 FORESTWOOD COURT

City State Zip Code
JUPITER FL 33458-7973

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DOCUMENT STORAGE SYSTEMS, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.224352

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JEAN CARD

Mailing Address 2203 LA GRANDE AVE.

City State Zip Code
ALEXANDRIA VA 22301-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF/JEAN CARD INK CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.211078

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DANIELLE J DAVIS

Mailing Address 1650 BROOKE ROAD

City State Zip Code
STAFFORD VA 22554-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214016

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BILLIE DOPSLAUF

Mailing Address 7198 JONES RD

City State Zip Code
BRYAN TX 77807-9780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.211488

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
HERB EHLERS

Mailing Address 1272 OSPREY

City State Zip Code
NAPLES FL 34105-2774

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.211499

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARK GOETTING

Mailing Address **8636 MARICOPA TRAIL**

City **KALAMAZOO** State **MI** Zip Code **49009-4925**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRONSON METHODIST HOSPITAL** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.211141

Date of Receipt
MM / DD / YYYY
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MARK HACKMEIER

Mailing Address **275 CHEROKEE CT.ESTES PARK**

City **ESTES PARK** State **CO** Zip Code **80517-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.211210

Date of Receipt
MM / DD / YYYY
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BRADLEY HASTINGS

Mailing Address **54 KENMORE RD**

City **BELMONT** State **MA** Zip Code **02478-3305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CRATE-ESCAPE.COM** Occupation **SELF EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211377B

Date of Receipt
MM / DD / YYYY
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-50.00

CHARGED BACK

Subtotal Of Receipts This Page (optional)..... **150.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SUSIE HOELLER

Mailing Address 2845 DEVONOAK BLVD

City State Zip Code
LAND O LAKES FL 34638-4368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOELLER LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.211391

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
CAROL JOHNSON

Mailing Address 2945 SILO COURT

City State Zip Code
ANDERSON CA 96007-3673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE MISSION SOCIETY CROSS CULTURAL WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.211485

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
STEVE KNOX

Mailing Address 6806 NW GRAND

City State Zip Code
OKLAHOMA CITY OK 73116-5415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALPINE, INC. INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
563.00

Transaction ID : SA17.211410

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 375.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT KUEPPER

Mailing Address 10 BISHOPSGATE

City State Zip Code
CONCORD NH 03301-3113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ORAL AND MAXILLOFACIAL SURGERY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.211227

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
CRAIG LANCASTER

Mailing Address 3070 SPEYERS RD

City State Zip Code
SELAH WA 98942-9243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
550.00

Transaction ID : SA17.211114

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL LINCOLN

Mailing Address 2330 MARINSHIP WAY STE 200

City State Zip Code
SAUSALITO CA 94965-2858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.211338

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

Subtotal Of Receipts This Page (optional).....▶ 2550.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. ANN M. LIVERMORE

Mailing Address 285 WOODSIDE DRIVE

City State Zip Code
WOODSIDE CA 94062-2353

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEWLETT-PACKARD EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211629

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS H. LIVERMORE

Mailing Address 285 WOODSIDE DRIVE

City State Zip Code
WOODSIDE CA 94062-2353

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEWLETT-PACKARD EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211646

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
LAWRENCE LUGASH

Mailing Address 528 14TH ST.

City State Zip Code
SANTA MONICA CA 90402-2928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAYTON CAPITAL CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.211433

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
300.00

Subtotal Of Receipts This Page (optional).....▶ 5700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DEREK MAGNETTE

Mailing Address **27 MAPLE ST #4**

City State Zip Code
CAMBRIDGE MA 02139-1115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF THE BOSS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211380B

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
-50.00

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
MARJORIE MAXWELL

Mailing Address **1902 PHEASANT RIDGE RD**

City State Zip Code
LEWISBURG PA 17837-7060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.211213

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
KATHLEEN MCCLAVE

Mailing Address **804 POTTS LANE**

City State Zip Code
BRYN MAWR PA 19010-2917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.211179

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **150.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JIM MCMANUS JR.

Mailing Address **88 CHESTNUT ST**

City State Zip Code
WESTON MA 02493-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF COMM. REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1200.00

Transaction ID : SA17.211363

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. DIANE M. MENDEZ-PADELFORD

Mailing Address **18104 S. SUMMER AVENUE**

City State Zip Code
ARTESIA CA 90701-3913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211630

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
DAN MILLER

Mailing Address **12 SOUTH RD**

City State Zip Code
KEY LARGO FL 33037-3729

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.224700

Date of Receipt
M M / D D / Y Y Y Y
06 15 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **3300.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GLYNNE MILLER

Mailing Address 755 S. EDGEVIEW CIRCLE

City	State	Zip Code
ANAHEIM	CA	92808-1402

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EXCEL TIRE & WHEEL	SALES/MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224665

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MATTHEW MILLER

Mailing Address 3077 OAKRAIDER DRIVE

City	State	Zip Code
ALAMO	CA	94507-1435

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
J.M. SMUCKER	MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211292

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY G. MOORE

Mailing Address 33801 VIA CAPRI

City	State	Zip Code
MONARCH BEACH	CA	92629-4518

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MCPHEE AVENUE PARTNERS	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224355

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DARIA PANNESI

Mailing Address 1497 MASS AVE

City State Zip Code
ARLINGTON MA 02476-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF STRUT N PUP

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211379B

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-50.00

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
VINCENT P PIETSCH

Mailing Address 2276 SATURDAY ST

City State Zip Code
NORTH PORT FL 34288-8531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.211313

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ALEXANDER ROOKS

Mailing Address 44 KENMORE RD

City State Zip Code
BELMONT MA 02478-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EXECUTIVE PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.211381B

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-50.00

CHARGED BACK

Subtotal Of Receipts This Page (optional).....▶ 0.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
NORMAN RUSSELL

Mailing Address **24348 SW BAKER ROAD**

City **SHERWOOD** State **OR** Zip Code **97140-8406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUSSELL CONSTRUCTION** Occupation **CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.224693

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RICHARD SHAFFER

Mailing Address **457 PEMBERTON RD**

City **KENNETT SQUARE** State **PA** Zip Code **19348-2293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.211484

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MICHAEL SHAW

Mailing Address **1030 SWINKS MILL RD**

City **MC LEAN** State **VA** Zip Code **22102-2161**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REFERENTIAL SYSTEMS, LLC** Occupation **MAINFRAME SOFTWARE DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Transaction ID : SA17.211204

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILMA SINCLAIR

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
342.00

Transaction ID : SA17.211307

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
58.00

B. Full Name (Last, First, Middle Initial)
MR. FREDERICK G. SMITH

Mailing Address 10706 BEAVERDAM ROAD

City State Zip Code
COCKEYSVILLE MD 21030-2207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SINCLAIR BROADCAST GROUP BUSINESS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.224707

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY J. TAMRAZ

Mailing Address 3419 VIA LIDO STE. 313

City State Zip Code
NEWPORT BEACH CA 92663-3908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERISTAR FINANCIAL CORPORATION FINANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.220773B

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-1000.00

CHARGED BACK

Subtotal Of Receipts This Page (optional)..... **58.00**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LEWIS VAN AMERONGEN

Mailing Address 509 MADISON AVENUE

City	State	Zip Code
NEW YORK	NY	10022-5501

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED; ENTREPRENEUR	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.224666

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
DOUG VANDERVEER

Mailing Address 3783 CATALINA DR

City	State	Zip Code
BEAVERCREEK	OH	45431-8107

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SERCO	SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.211507

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address 13611 DEERING BAY DRIVE

City	State	Zip Code
CORAL GABLES	FL	33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17.211223

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 450.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) CLIFFORD WADE Mailing Address 2345 WATKINS LAKE ROAD City WATERFORD State MI Zip Code 48328-1441 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer RETIRED Occupation RETIRED Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="225.00"/>		Transaction ID : SA17.211311 Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2015 CONTRIBUTION Amount of Each Receipt this Period <input type="text" value="50.00"/>
---	--	---

B. Full Name (Last, First, Middle Initial) DAVID WHEELER Mailing Address 877 ISLAND AVE City SAN DIEGO State CA Zip Code 92101-7116 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer MEDIMPACT Occupation ACCOUNTANT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="500.00"/>		Transaction ID : SA17.211509 Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2015 CONTRIBUTION Amount of Each Receipt this Period <input type="text" value="500.00"/>
--	--	--

C. Full Name (Last, First, Middle Initial) DAVID A WILLIAMS Mailing Address 2001 HALLUM ST City CLOVIS State NM Zip Code 88101-8685 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer WILLIAMS INSURANCE LLC Occupation INSURANCE AGENT Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <input type="text" value="375.00"/>		Transaction ID : SA17.211170 Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2015 CONTRIBUTION Amount of Each Receipt this Period <input type="text" value="75.00"/>
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Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DAVID A WILLIAMS

Mailing Address 2001 HALLUM ST

City State Zip Code
CLOVIS NM 88101-8685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS INSURANCE LLC INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.211175

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
DAVID A WILLIAMS

Mailing Address 2001 HALLUM ST

City State Zip Code
CLOVIS NM 88101-8685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAMS INSURANCE LLC INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.211176

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MATTHEW YAKOVAKIS

Mailing Address 192 RT 101 WEST

City State Zip Code
BEDFORD NH 03110-5420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ETHAN ALLEN INTERIORS, BEDFORD, NH RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224685

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 400.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) MS. BARBARA R. BANKE		Transaction ID : SA17.211849
Mailing Address 421 AVIATION BLVD		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2015
City SANTA ROSA	State CA	Zip Code 95403-1069
FEC ID number of contributing federal political committee.		CONTRIBUTION
Name of Employer JACKSON FAMILY WINES		Amount of Each Receipt this Period 2700.00
Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 2700.00		

B. Full Name (Last, First, Middle Initial) SANDRA BARRETT		Transaction ID : SA17.224679
Mailing Address P.O. BOX 1185		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2015
City ALTO	State NM	Zip Code 88312-1185
FEC ID number of contributing federal political committee.		CONTRIBUTION
Name of Employer NONE		Amount of Each Receipt this Period 250.00
Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) DENNIS BASSFORD		Transaction ID : SA17.224699
Mailing Address 6720 FORT DENT WAY		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2015
City SEATTLE	State WA	Zip Code 98188-8508
FEC ID number of contributing federal political committee.		CONTRIBUTION
Name of Employer MONEYTREE, INC.		Amount of Each Receipt this Period 500.00
Occupation EXECUTIVE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 500.00		

Subtotal Of Receipts This Page (optional).....▶ 3450.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DIANA BEAN

Mailing Address 1185 US ROUTE ONE, STE 3

City	State	Zip Code
FREEPORT	ME	04032-7129

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NONE	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17.211538

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 300.00

B. Full Name (Last, First, Middle Initial)
MRS. LINDA L. BEAN

Mailing Address 30-32 SCHOOL STREET

City	State	Zip Code
ROCKLAND	ME	04841-

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
LINDA BEAN'S MAINE LOBSTER	MSC CERTIFIED MAINE LOBSTER DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3300.00

Transaction ID : SA17.211537

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 300.00

C. Full Name (Last, First, Middle Initial)
EDWARD BLACKBURNE

Mailing Address 769 FOREST LANE DR

City	State	Zip Code
CONROE	TX	77302-1214

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TUBULAR PERFORMING MFG	COMPANYPRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1100.00

Transaction ID : SA17.224632

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. JANE BOECKMANN

Mailing Address 15505 ROSCOE BLVD.

City NORTH HILLS State CA Zip Code 91343-6503

FEC ID number of contributing federal political committee. **C**

Name of Employer GALPIN MOTORS, INC. Occupation TREASURER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211853

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MS. LYNN A. BOOTH

Mailing Address 10431 BELLAGIO RD

City LOS ANGELES State CA Zip Code 90077-3818

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211756

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. ROSS E. BROWN

Mailing Address 10414 DAKINS DRIVE

City NORTH CHESTERFIELD State VA Zip Code 23236-

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.214027

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 5500.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WINIFRED BROWN

Mailing Address 212 AUDUBON BLVD

City	State	Zip Code
NEW ORLEANS	LA	70118-5542

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
HANSEL BROWN	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1250.00

Transaction ID : SA17.211763

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN DAVID BUKRY

Mailing Address 3707 BRANDY ROCK WAY

City	State	Zip Code
REDWOOD CITY	CA	94061-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17.211848

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 400.00

C. Full Name (Last, First, Middle Initial)
DARRELL CAMILLETTI

Mailing Address 2419 EAST VICTORY WAY

City	State	Zip Code
CRAIG	CO	81625-1111

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MOUNTAIN WEST INSURANCE & FINANCIAL SE	INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.224669

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 900.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RICHMOND DUGGER

Mailing Address 146 WATERBURY RD

City	State	Zip Code
KILMARNOCK	VA	22482-3546

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UXB INTERNATIONAL, INC	CORPORATE BOARD CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224695

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JANET FLACK

Mailing Address 1078 WYOMING AVE

City	State	Zip Code
WYOMING	PA	18644-1331

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	INTERIOR ARCHITECT/DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224672

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. DAVID J. FRENCH

Mailing Address P.O. BOX 7287

City	State	Zip Code
RANCHO SANTA FE	CA	92067-7287

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211912

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ELIZABETH FRENCH

Mailing Address 1705 CALHOUN ST

City State Zip Code
NEW ORLEANS LA 70118-6103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OCHSNER PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.211767

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LISA GALLAGHER

Mailing Address 4 PERKINS WAY

City State Zip Code
NEWBURYPORT MA 01950-4016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HAWTAN LEATHERS LLC LEATHER MANUFACTURER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.211809

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. DANIEL GREENE

Mailing Address P.O. BOX 1232

City State Zip Code
ROSEVILLE CA 95678-8232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAYMAN MISSIONARY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.223177

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BRENDAN HEATHERMAN

Mailing Address **82 LUPINE DRIVE**

City State Zip Code
STAFFORD VA 22556-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214028

Date of Receipt
M M / D D / Y Y Y Y
06 16 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
S. DALE HIGH

Mailing Address **P.O. BOX 10008**

City State Zip Code
LANCASTER PA 17605-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIGH COMPANY LLC CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.211747

Date of Receipt
M M / D D / Y Y Y Y
06 16 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
KATHKEEN HILL

Mailing Address **12900 CAMINO DEL VALLE**

City State Zip Code
POWAY CA 92064-1814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JAMES L. HILL, DDS, INC WIFE, MOTHER OF 7, COTPORATE LIAISON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224671

Date of Receipt
M M / D D / Y Y Y Y
06 16 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ **1250.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DAVID L. HOROWITZ

Mailing Address 27241 LA PAZ ROAD STE. B.

City	State	Zip Code
LAGUNA NIGUEL	CA	92677-3636

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOROWITZ GROUP	CEO & CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211850

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	16	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

SEE REATTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. HOROWITZ

Mailing Address 27241 LA PAZ ROAD STE. B.

City	State	Zip Code
LAGUNA NIGUEL	CA	92677-3636

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOROWITZ GROUP	CEO & CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211850B

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	16	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
MRS. MICHELLE M. HOROWITZ

Mailing Address 27241 LA PAZ ROAD STE. B.

City	State	Zip Code
LAGUNA NIGUEL	CA	92677-3636

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211845

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	16	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ANTHONY KINNINGER

Mailing Address 2108 CATON WAY SW

City	State	Zip Code
OLYMPIA	WA	98502-1105

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
1,000	FINANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224706

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. EMILY KINNIER

Mailing Address 350 E. TAYLOR STREET, APT 6201

City	State	Zip Code
SAN JOSE	CA	95112-3157

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CISCO SYSTEMS, INC.	TECHNICAL WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211583

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. ALAN KWAN

Mailing Address 6776 SOUTHWEST FREEWAY STE. 363

City	State	Zip Code
HOUSTON	TX	77074-2111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
KWAN & ASSOCIATES, PC	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211888

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEVEN LADIK

Mailing Address 7326 LAKEWOOD BLVD.

City	State	Zip Code
DALLAS	TX	75214-3512

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FRAGOMEN, DEL REY, BERNSEN & LOEWY	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211758

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
J LINK LEAVENS

Mailing Address 1087 WESTRIDGE DR

City	State	Zip Code
VENTURA	CA	93003-1458

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LEAVENS RANCHES	SELF-EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224673

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. MICHELLE LEBHERZ

Mailing Address 1435 LEXINGTON AVENUE

City	State	Zip Code
SN MATEO	CA	94402-3812

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
THOMSON RECUITES	GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211744

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JUDITH LOVE

Mailing Address 2065 OLD DOMINION RD.

City ATLANTA State GA Zip Code 30350-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 250.00

Transaction ID : SA17.224681

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JUDITH MALETER

Mailing Address 13027 BELLERIVE LANE

City ORLANDO State FL Zip Code 32828-8830

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 300.00

Transaction ID : SA17.224690

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
JOHN MANDLER

Mailing Address 8 UNDERCLIFF TERRACE

City WEST ORANGE State NJ Zip Code 07052-3930

FEC ID number of contributing federal political committee. **C**

Name of Employer MANDEL, KATZ & BROSNAN LLP Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 266.00

Transaction ID : SA17.211578

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. JEANINE C. MARTIN

Mailing Address 13047 BRUCE COUR

City State Zip Code
LOVETTSVILLE VA 20180-2964

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.214018

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RON MARTIN

Mailing Address 1742 PEACOCK LANE

City State Zip Code
FULLERTON CA 92833-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INFORMATION SCIENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.223341

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
SAMUEL MASLAK

Mailing Address P.O. BOX 1730

City State Zip Code
VAIL CO 81658-1730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.224697

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1025.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PHIL MCCORMAC

Mailing Address 1701 E MEADOWBROOK AVE

City State Zip Code
PHOENIX AZ 85016-5146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COE & VAN LOO CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224678

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DR. JAMES A. O'NEILL

Mailing Address 40 RAVINES COURT

City State Zip Code
LIMA OH 45805-4000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ORTHOPAEDIC INSTITUTE OF OHIO PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.211876

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RICHARD ODOM

Mailing Address 2333 STAFFORD RD

City State Zip Code
THOUSAND OAKS CA 91361-5061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.224502

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1350.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JERRY PERENCHIO

Mailing Address 1999 AVENUE OF THE STARS STE. 3050

City LOS ANGELES State CA Zip Code 90067-4613

FEC ID number of contributing federal political committee.

Name of Employer CHARTWELL PARTNERS Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211855

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
LYNN PERENIC

Mailing Address 32450 SCOTTSDALE

City FRANKLIN State MI Zip Code 48025-1039

FEC ID number of contributing federal political committee.

Name of Employer ARGENT TAPE AND LABEL Occupation SMALL BUSINESS (MANUFACTURING) OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224701

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JOEL W. PHILLIPS

Mailing Address 520 PORTOLA ROAD

City PORTOLA VALLEY State CA Zip Code 94028-7645

FEC ID number of contributing federal political committee.

Name of Employer APPLE INC. Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211736

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT RANKIN

Mailing Address 701 MERCER ROAD

City	State	Zip Code
BUTLER	PA	16001-1841

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224242

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

B. Full Name (Last, First, Middle Initial)
STEPHEN REYNOLDS

Mailing Address 13941 GUNNISON WAY

City	State	Zip Code
BROOMFIELD	CO	80020-6051

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFINITY OIL & GAS, INC.	GEOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224698

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial)
MICHAEL RICHARDSON

Mailing Address P.O. BOX 12

City	State	Zip Code
ARDMORE	OK	73402-0012

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MICHAEL D. RICHARDSON, INC.	ACCOUNTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224675

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. MARY ROONEY

Mailing Address **2451 MARINA DRIVE**

City **NEWPORT BEACH** State **CA** Zip Code **92663-5649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.211757

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MR. ROGER ROYSE

Mailing Address **1717 EMBARCADERO ROAD**

City **PALO ALTO** State **CA** Zip Code **94303-3357**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ROYSE LAW FIRM, PC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17.211852

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS. DEBRA YARBROUGH RUSSO

Mailing Address **4125 GREEN VALLEY ROAD**

City **FAIRFIELD** State **CA** Zip Code **94534-1346**

FEC ID number of contributing federal political committee. **C**

Name of Employer **B. & L. PROPERTIES II** Occupation **DEVELOPER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211738

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **5200.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DARREN SACK

Mailing Address 1590 SUMMERFIELD DRIVE

City State Zip Code
CAMPBELL CA 95008-3752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BLUE DATA SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211745

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MRS. LOREN SACK

Mailing Address 1590 SUMMERFIELD DRIVE

City State Zip Code
CAMPBELL CA 95008-3752

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211743

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MRS. TAWNY LEE SANDERS

Mailing Address 10659 BELLAGIO ROAD

City State Zip Code
LOS ANGELES CA 90077-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211847

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 8100.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. WALTER J. SANDERS III

Mailing Address 10659 BELLAGIO ROAD

City State Zip Code
LOS ANGELES CA 90077-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.211856

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
ABRAHAM SCHULTZ

Mailing Address 4901 SEMINARY RD

City State Zip Code
ALEXANDRIA VA 22311-1857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NAVAL RESEARCH LABORATORY RETIRED RESEARCH PHYSICIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.224694

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES SHAPIRO

Mailing Address 5845 RIDGEVIEW DRIVE

City State Zip Code
DOYLESTOWN PA 18902-1366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SRS MARKETING SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.211604

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 3450.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. MEREDITH R. SIEGFRIED

Mailing Address 1841 E. 27TH STREET

City State Zip Code
TULSA OK 74114-4201

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NORDAM CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211861

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. DEBORAH ANN SIMPSON

Mailing Address P.O. BOX 182

City State Zip Code
GLENBROOK NV 89413-0182

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211889

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. NANCY ANN SIMPSON

Mailing Address P.O. BOX 182

City State Zip Code
GLENBROOK NV 89413-0182

FEC ID number of contributing federal political committee.

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.211890

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN SLAPP

Mailing Address 94 NORTH ROAD

City State Zip Code
PRINCETON NJ 08540-2430

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224674

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DR. DAN SPENGLER

Mailing Address 5400 STANFORD DRIVE

City State Zip Code
NASHVILLE TN 37215-4236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VANDERBILT MEDICAL CENTER, NASHVILLE MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.224696

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FREDERICK STEIN

Mailing Address 1430 FOUNTAIN VIEW DR.

City State Zip Code
HOUSTON TX 77057-2495

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TPIC ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.224656

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 950.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DENNY TODD

Mailing Address **7564 S. BRUCE ST.**

City	State	Zip Code
LAS VEGAS	NV	89123-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 425.00

Transaction ID : SA17.211566

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address **13611 DEERING BAY DRIVE**

City	State	Zip Code
CORAL GABLES	FL	33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17.224190

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address **13611 DEERING BAY DRIVE**

City	State	Zip Code
CORAL GABLES	FL	33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Transaction ID : SA17.224191

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

Subtotal Of Receipts This Page (optional).....▶ _____ 200.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GARY WALDEN

Mailing Address 5909 COUSTEAU CT.

City	State	Zip Code
ELK GROVE	CA	95758-4226

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Transaction ID : SA17.211707

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
LAWRENCE WALTON

Mailing Address 13411 PERTHSHIRE

City	State	Zip Code
HOUSTON	TX	77079-6027

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ECONOMY MUD PRODUCTS CO.	COMPANY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.224676

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
HERSCHEL WILLIAMS

Mailing Address 9453 JAMAICA BEACH

City	State	Zip Code
GALVESTON	TX	77554-8602

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-INTEGRAL SALES, LLC	OWNER/SALESMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.224677

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 600.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAELON WRIGHT

Mailing Address 201 W. BIG BEAVER ROAD, #1420

City State Zip Code
TROY MI 48084-4120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TMW ENT. BUSINESS PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.224711

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
JACQUELINE ANDERSON

Mailing Address 7925 BEN HOGAN DR

City State Zip Code
LAS VEGAS NV 89149-6611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.212166

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. STEVE AVOYER

Mailing Address 5950 FOLSOM DRIVE

City State Zip Code
LA JOLLA CA 92037-7325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLOCKE-AVOYER COMMERCIAL REAL ESTATE COMMERCIAL REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
513.00

Transaction ID : SA17.211992

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

Subtotal Of Receipts This Page (optional).....▶ 2563.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RAYMOND CYPHERS

Mailing Address 3118 DOUGLAS CIRCLE

City	State	Zip Code
LAKE OSWEGO	OR	97035-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	FINANCIAL SERVICES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17.212236

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY DORAN

Mailing Address 5 SETTLERS WAY

City	State	Zip Code
STAFFORD	VA	22554-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
USPS	PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 600.00

Transaction ID : SA17.214041

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ILONA S ENGLISH

Mailing Address 9 RUNYON MILL ROAD

City	State	Zip Code
RINGOES	NJ	08551-1514

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Transaction ID : SA17.224667

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROGER GROTH

Mailing Address 9135 295TH STREET W

City NORTHFIELD State MN Zip Code 55057-5198

FEC ID number of contributing federal political committee. **C**

Name of Employer PERMATITE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224668

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RUSSELL HARJU

Mailing Address 305 E 19TH ST.

City COSTA MESA State CA Zip Code 92627-2348

FEC ID number of contributing federal political committee. **C**

Name of Employer FIELDPIECE INSTRUMENTS Occupation SALES AND MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Transaction ID : SA17.212301

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
MARINE HIRSCHFELD

Mailing Address 413 CARRIAGE DRIVE

City SEQUIM State WA Zip Code 98382-9711

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation PERFORMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.212240

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 460.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JON LUBERT

Mailing Address 2929 ARCH STREET

City State Zip Code
PHILADELPHIA PA 19104-2857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JL SQUARED GROUP, LLC FOUNDER AND MANAGING MEMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.211977

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DAVID R LUNDQUIST

Mailing Address 41-980 KAKAINA STREET

City State Zip Code
WAIMANALO HI 96795-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HH HOLDINGS INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.212322

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address 415 PATTON COVE

City State Zip Code
BASTROP TX 78602-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.212207

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 1525.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CAROL NICHOLS

Mailing Address 4206 NORMANDY AVE

City State Zip Code
DALLAS TX 75205-2040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAPITAL ONE BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.212233

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MARTHA PAULISSIAN

Mailing Address 3848 WINFORD DRIVE

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.212303

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MARTHA PAULISSIAN

Mailing Address 3848 WINFORD DRIVE

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.222286

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 150.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES SMITH

Mailing Address 12750 S. PIPELINE RD

City State Zip Code
EULESS TX 76040-5248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DALWORTH CLEAN OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.211989

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
700.00

B. Full Name (Last, First, Middle Initial)
MRS. JANET INGALLS VAN DINE

Mailing Address 416 VAN DINE RD.

City State Zip Code
MONTOURSVILLE PA 17754-7984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PPK ANIMAL HEALTHCARE GOVERNMENT RELATIONS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.211976

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ANTHONY WARD

Mailing Address 902 7TH AVENUE

City State Zip Code
GRAND RAPIDS MN 55744-3420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PUBLIC UTILITIES COMMISSION GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.212227

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. JENNIFER DURAN

Mailing Address **8 OFFSHORE**

City State Zip Code
NEWPORT COAST CA 92657-2163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.228223B

Date of Receipt
M M / D D / Y Y Y Y
06 18 2015

CONTRIBUTION

Amount of Each Receipt this Period
-500.00

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
MS. PAMELA GASLOW

Mailing Address **1800 PURDY AVE.**

City State Zip Code
MIAMI BEACH FL 33139-1465

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMPIRE OFFICE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.212481

Date of Receipt
M M / D D / Y Y Y Y
06 18 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
PAMELA GATTO

Mailing Address **339 COCOA AVENUE**

City State Zip Code
INDIALANTIC FL 32903-3407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MIKE GATTO, INC. BUSINESS OWNER - TIRE DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.224691

Date of Receipt
M M / D D / Y Y Y Y
06 18 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **2700.00**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. LAWRENCE GAY

Mailing Address 15970 SW 252 ST.

City	State	Zip Code
HOMESTEAD	FL	33031-2000

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.212488

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
DANIEL J GORMAN

Mailing Address 403 N. INTERLACHEN AVENUE

City	State	Zip Code
WINTER PARK	FL	32789-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 750.00

Transaction ID : SA17.212565

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
DENNIS HENNESSY

Mailing Address 9229 FOSTER

City	State	Zip Code
OVERLAND PARK	KS	66212-2273

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 700.00

Transaction ID : SA17.212487

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

Total This Period (last page this line number only).....▶ _____

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEVEN HOOLEY

Mailing Address 11308 STONY CREEK RD.

City	State	Zip Code
MILAN	MI	48160-9577

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1100.00

Transaction ID : SA17.212413

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
ANNE HUMMEL

Mailing Address 7 COOKE AVENUE

City	State	Zip Code
KINGSTON	MA	02364-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
KRAUS&HUMMEL LLP	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.212620

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
MR. WARREN J. KAPLAN

Mailing Address 15340 PEPPER LANE

City	State	Zip Code
SARATOGA	CA	95070-6427

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TECH CONSULTANT	SUNSET TECH CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 550.00

Transaction ID : SA17.212548

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 450.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM LICHTY

Mailing Address 2326 S 128TH ST

City State Zip Code
BURIEN WA 98168-3055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BOEING PLANNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.212621

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313.00

Transaction ID : SA17.212366

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
DAVID MATTHEW

Mailing Address 11812 BREADFRUIT LANE

City State Zip Code
VENICE FL 34292-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US ARMY SOLDIER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.212386

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 175.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ADAM STOLINSKI

Mailing Address **9450 SW GEMINI DR**

City **BEAVERTON** State **OR** Zip Code **97008-7105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.212423

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. PETER A. TALMAN

Mailing Address **435 CONESTOGA RD**

City **BERWYN** State **PA** Zip Code **19312-1622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JONES LONG LA SALLE** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.212476

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. PETER A. TALMAN

Mailing Address **435 CONESTOGA RD**

City **BERWYN** State **PA** Zip Code **19312-1622**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JONES LONG LA SALLE** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.220632

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			18			2015			

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ **5450.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES THOMPSON

Mailing Address 1214 TULIP TREE LN

City State Zip Code
WEST DES MOINES IA 50266-6666

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STONEY CREEK HOSPITALITYEMPLOYER * BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224659

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DANA TRIER

Mailing Address 205 WEST 76 TH

City State Zip Code
NEW YORK NY 10023-8221

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NA RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224658

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
LANNETTE TURICCHI

Mailing Address P.O. BOX 50006

City State Zip Code
PASADENA CA 91115-0006

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF PRODUCER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224710

Date of Receipt

/ /

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ARTHUR CARLSON

Mailing Address **CFFOLKS 1225 19TH ST NW**

City	State	Zip Code
WASHINGTON	DC	20036-2411

FEC ID number of contributing federal political committee. **C**

Name of Employer CFFOLKS	Occupation BUSINESS OWNER
------------------------------------	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.227548

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 300.00

B. Full Name (Last, First, Middle Initial)
WILLIAM D CARR

Mailing Address **10222 SW 228TH STTREET**

City	State	Zip Code
VASHON	WA	98070-7089

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOTHERAPIST
--	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 225.00

Transaction ID : SA17.212776

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
MS. TRISHA CHILCUTT

Mailing Address **127 ROUTT**

City	State	Zip Code
SAN ANTONIO	TX	78209-4676

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PROPERTY MANAGEMENT
--	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.213500

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 500.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RON COZORT

Mailing Address 5300 TOWN & COUNTRY BLVD

City	State	Zip Code
FRISCO	TX	75034-6894

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ALLIED INSURANCE AGENCY INC	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227311

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
RON COZORT

Mailing Address 5300 TOWN & COUNTRY BLVD

City	State	Zip Code
FRISCO	TX	75034-6894

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ALLIED INSURANCE AGENCY INC	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.227312

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BLAKE DEVITT

Mailing Address 3215 W. GULF DR.
E-102

City	State	Zip Code
SANIBEL	FL	33957-5651

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.225085

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. LANA C. DONALD

Mailing Address 8915 SUNNYWOOD PLACE

City BOCA RATON State FL Zip Code 33496-5056

FEC ID number of contributing federal political committee. **C**

Name of Employer BAERS FURNITURE Occupation SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.213505

Date of Receipt
MM / DD / YYYY
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. JIM ELDREDGE

Mailing Address P.O. BOX 71544

City CLIVE State IA Zip Code 50325-0544

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213531

Date of Receipt
MM / DD / YYYY
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DON ESTES

Mailing Address 1000 E ASH LN

City EULESS State TX Zip Code 76039-4773

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.224629

Date of Receipt
MM / DD / YYYY
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GINNY FEY

Mailing Address 224 E BAY BLVD S

City State Zip Code
TRAVERSE CITY MI 49686-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.212686

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
LISA GALLAGHER

Mailing Address 4 PERKINS WAY

City State Zip Code
NEWBURYPORT MA 01950-4016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HAWTAN LEATHERS LLC LEATHER MANUFACTURER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.212768

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LINDA GEBHARDT

Mailing Address 9525 SEMIAHMOO PKWY

City State Zip Code
BLAINE WA 98230-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.227318

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
EDWIN GRAY

Mailing Address 10132 WHITE TROUT LANE

City State Zip Code
TAMPA FL 33618-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RONALD REAGAN, GOVERNOR, AND THE W RONALD REAGAN, GOVERNOR, AND THE V

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.224570

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
HENRY HAGER

Mailing Address 15281 KILBIRNIE DRIVE

City State Zip Code
FORT MYERS FL 33912-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.227550

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES HOWSE

Mailing Address 6822 WIED ROAD

City State Zip Code
LA GRANGE TX 78945-4162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RETIRED INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227543

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. CYNTHIA G. KINES

Mailing Address P.O. BOX 1865

City State Zip Code
STAFFORD VA 22555-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.214049

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JAMES MICHAEL LOVE

Mailing Address 659 HUNTERS LANE

City State Zip Code
LEWISBERRY PA 17339-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J MICHAEL LOVE CONSULTING CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Transaction ID : SA17.212688

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

C. Full Name (Last, First, Middle Initial)
R LAREE MCGUIRE

Mailing Address 68-337 OLOHIO ST

City State Zip Code
WAIALUA HI 96791-9364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.227351

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. SARAH A. MULLANE BECKER

Mailing Address 11 GRANDVIEW AVENUE

City State Zip Code
KATONAH NY 10536-1909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FUTURE VALUE ASSOCIATES FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213527

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ELEANOR RATHS

Mailing Address 1144 GRANNY WHITE COURT

City State Zip Code
NASHVILLE TN 37204-4115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MUSIC OF THE BAROQUE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227330

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DAVID ROBERTS

Mailing Address 8650 CHRISTIAN CEMETERY ROAD

City State Zip Code
BURTON TX 77835-6035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PENN WEST PETROLEUM MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.227542

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
NORMAN ROGERS

Mailing Address 3750 S LAS VEGAS BLVD

City	State	Zip Code
LAS VEGAS	NV	89158-4312

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.227552

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
ROBERT SEKLEMIAN

Mailing Address 4505 S UNIT 124

City	State	Zip Code
DENVER	CO	80237-

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RITIED	GEOLOGIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 800.00

Transaction ID : SA17.227347

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
MS SHIRLEY SPELLERBERG

Mailing Address 3621 LYNCHBURG DRIVE

City	State	Zip Code
DENTON	TX	76208-5329

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.212685

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			19			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.227551

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BRAD BIRDWELL

Mailing Address **17630 LAKE CYPRESS HILL DR.**

City **CYPRESS** State **TX** Zip Code **77429-7133**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GR BIRDWELL CONSTRUCTION** Occupation **CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.212987

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM BUSH

Mailing Address **3435 RIDGEWOOD ROAD, NW**

City **ATLANTA** State **GA** Zip Code **30327-2417**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ASPEN PARTNERS, LTD.** Occupation **FINANCIAL SERVICES**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.212876

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional)..... **1200.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM HOLT

Mailing Address **5000 MISSION OAKS BLVD #17**

City **AUSTIN** State **TX** Zip Code **78735-6741**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.212910

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			20			2015			

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
STEVEN LADIK

Mailing Address **7326 LAKEWOOD BLVD.**

City **DALLAS** State **TX** Zip Code **75214-3512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FRAGOMEN, DEL REY, BERNSEN & LOEWY** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
203.00

Transaction ID : SA17.212858

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			20			2015			

CONTRIBUTION

Amount of Each Receipt this Period
3.00

C. Full Name (Last, First, Middle Initial)
RON MARTIN

Mailing Address **1742 PEACOCK LANE**

City **FULLERTON** State **CA** Zip Code **92833-2244**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **INFORMATION SCIENTIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.212984

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			20			2015			

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ **303.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GREG MCTIGUE

Mailing Address **2 GOLD ST**

City State Zip Code
NY NY 10038-4821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HP SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.212832

Date of Receipt
M M / D D / Y Y Y Y
06 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
GLYNNE MILLER

Mailing Address **755 S. EDGEVIEW CIRCLE**

City State Zip Code
ANAHEIM CA 92808-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXCEL TIRE & WHEEL SALES/MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.212839

Date of Receipt
M M / D D / Y Y Y Y
06 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GLYNNE MILLER

Mailing Address **755 S. EDGEVIEW CIRCLE**

City State Zip Code
ANAHEIM CA 92808-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXCEL TIRE & WHEEL SALES/MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.212949

Date of Receipt
M M / D D / Y Y Y Y
06 20 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional)..... **625.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PHILIP SISSON

Mailing Address 5010 LARNO DRIVE

City State Zip Code
ALEXANDRIA VA 22310-1238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213031

Date of Receipt
MM / DD / YYYY
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
CAROLE SPURRIER

Mailing Address 209 BREEZY CREEK CT

City State Zip Code
BERLIN MD 21811-4202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LUCENT RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.212980

Date of Receipt
MM / DD / YYYY
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHARLES STENCEL

Mailing Address 7 DORCHESTER COURT

City State Zip Code
SUGAR GROVE IL 60554-4139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SERENITY PACKAGING CORPORATION BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.212847

Date of Receipt
MM / DD / YYYY
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 800.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BOB TAYLOR

Mailing Address 2434 BEACON FOREST DR.

City State Zip Code
CHARLOTTE NC 28270-2262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TAYLOR PROPERTIES GROUP, LLC COMMERCIAL REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.212897

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
CLIFFORD WADE

Mailing Address 2345 WATKINS LAKE ROAD

City State Zip Code
WATERFORD MI 48328-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.212834

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
SHERRARD WALLINGFORD

Mailing Address 25 COVENTRY CT

City State Zip Code
PRAIRIE VILLAGE KS 66208-5226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA NA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
263.00

Transaction ID : SA17.212874

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

Subtotal Of Receipts This Page (optional).....▶ 63.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ANDREW WEXLER

Mailing Address 180 SULLING WAY

City State Zip Code
ALPHARETTA GA 30009-7174

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HFE CORPORATION EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213025

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MICHAEL BAXLEY

Mailing Address 4056 PRAIRIE LANE

City State Zip Code
BETTENDORF IA 52722-7214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRIVATE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.213119

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARGARET BELLOCK

Mailing Address 1501 N. STATE PARKWAY

City State Zip Code
CHICAGO IL 60610-1676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.213109

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1250.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JEAN CARD

Mailing Address 2203 LA GRANDE AVE.

City State Zip Code
ALEXANDRIA VA 22301-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF/JEAN CARD INK CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213115

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CHRISTINE NANIA

Mailing Address 44127 TURF FIELD SQ

City State Zip Code
CHANTILLY VA 20152-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213061

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PAUL NEUHOFF

Mailing Address 2918 MARSHALL BLVD

City State Zip Code
SULLIVANS ISLAND SC 29482-9637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GSP MARKETING TECHNOLOGIES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.213111

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MIKE SCHUTT

Mailing Address 17803 ARBOR HAVEN DR.

City	State	Zip Code
TAMPA	FL	33647-3114

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
PLENARY GROUP	INFRASTRUCTURE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.213142

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			21			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
JAMES WRIGHT

Mailing Address 6506 PATRICK DRIVE

City	State	Zip Code
DALLAS	TX	75214-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1400.00

Transaction ID : SA17.213056

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			21			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY ADDARIO

Mailing Address 1100 INDUSTRIAL ROAD APT 1

City	State	Zip Code
SAN CARLOS	CA	94070-4131

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ADDARIO LUNG CARNCR MEDCIANLL	CHAIR / C.E.O.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.213784

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 850.00

Total This Period (last page this line number only).....▶ _____

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JACQUELINE ANDERSON

Mailing Address 7925 BEN HOGAN DR

City	State	Zip Code
LAS VEGAS	NV	89149-6611

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Transaction ID : SA17.213598

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

_____	25.00
-------	-------

B. Full Name (Last, First, Middle Initial)
JOHN W BARNHART JR

Mailing Address 5700 4TH ST. N.

City	State	Zip Code
SAINT PETERSBURG	FL	33703-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JWB MANAGEMENT GROUP, INC.	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.213683

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

_____	100.00
-------	--------

C. Full Name (Last, First, Middle Initial)
MS. KATHERINE BERGER

Mailing Address 21 FOXBORO

City	State	Zip Code
IRVINE	CA	92614-7524

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SAINT JOSEPH HOSPITAL, ORANGE	HOSPITAL ADMIN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.213769

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

_____	250.00
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Subtotal Of Receipts This Page (optional).....▶ **375.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DAVID CARTMILL

Mailing Address 18 OLD BRIDGE RD

City State Zip Code
BUZZARDS BAY MA 02532-3437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.213471

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
JONG CHEN

Mailing Address 3941 J STREET

City State Zip Code
SACRAMENTO CA 95819-3628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213467

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN CRISAFULLI

Mailing Address 9888 WAPLES STREET

City State Zip Code
SAN DIEGO CA 92121-2921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BEHIND THE SCENES INC. BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.213762

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1025.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. GIOVANNA CUGNASCA

Mailing Address 254 EAST 68TH STREET APT 16A

City	State	Zip Code
NEW YORK	NY	10065-6015

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EMCOR SECURITIES	V.P. DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213770

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BILLIE DOPSLAUF

Mailing Address 7198 JONES RD

City	State	Zip Code
BRYAN	TX	77807-9780

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213494

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY DORAN

Mailing Address 5 SETTLERS WAY

City	State	Zip Code
STAFFORD	VA	22554-7601

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
USPS	PILOT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213176

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL GLAUBER

Mailing Address 14 WINCREST FALLS DR

City	State	Zip Code
CYPRESS	TX	77429-5154

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1125.00

Transaction ID : SA17.213697

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 25.00

B. Full Name (Last, First, Middle Initial)
DANIEL J GORMAN

Mailing Address 403 N. INTERLACHEN AVENUE

City	State	Zip Code
WINTER PARK	FL	32789-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF EMPLOYED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 750.00

Transaction ID : SA17.213206

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
MS. DEBORAH GUIBORD

Mailing Address 305 DIAMOND AVENUE

City	State	Zip Code
BALBOA ISLAND	CA	92662-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.213766

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 375.00

Total This Period (last page this line number only).....▶ _____

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
PATRICK HOGAN

Mailing Address 19 HATTIE LANE

City	State	Zip Code
BILLERICA	MA	01821-3503

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	SECURITY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.213689

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

B. Full Name (Last, First, Middle Initial)
MRS. CAROLYN S. HOLDER

Mailing Address 409 NORTH STAR LANE

City	State	Zip Code
NEWPORT BEACH	CA	92660-5717

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	C.P.A.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213786

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

5	0	0	.	0	0
---	---	---	---	---	---

C. Full Name (Last, First, Middle Initial)
TODD KAHLE

Mailing Address 2077 ZUERN DR

City	State	Zip Code
HARTFORD	WI	53027-8877

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
E-IMAGEDATA CORP.	VP ENGINEERING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.213460

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

2	5	0	.	0	0
---	---	---	---	---	---

Subtotal Of Receipts This Page (optional).....▶

7	7	5	.	0	0
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Total This Period (last page this line number only).....▶

7	7	5	.	0	0
---	---	---	---	---	---

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOHN KEEGAN

Mailing Address 1129 BROAD STREET

City State Zip Code
SHREWSBURY NJ 07702-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHARLES EDISON FUND CHAIRMAN / PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213783

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
OLIVER KLINGER

Mailing Address 10828 BRENNER CREEK COURT

City State Zip Code
HOUSTON TX 77079-7300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OILDOM PUBLISHING CO. PUBLISHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.213190

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. MAUREEN T. KOETZ

Mailing Address 355 S. END AVENUE APT 30J

City State Zip Code
NEW YORK NY 10280-1059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213782

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 850.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DAHLIA LOEB

Mailing Address **41 FIFTH AVENUE**

City State Zip Code
NEW YORK NY 10003-4319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REVELLE CAPITAL MANAGEMENT INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213638

Date of Receipt
M M / D D / Y Y Y Y
06 22 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS. KAREN M. MARKS

Mailing Address **1 NORTH BERKSHIRE LANE**

City State Zip Code
ROUND LAKE IL 60073-9776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAXTER HEALTHCARE V.P.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.213628

Date of Receipt
M M / D D / Y Y Y Y
06 22 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS. LISA MCBEAN

Mailing Address **38 RUE FONTAINEBLEAU**

City State Zip Code
NEWPORT BEACH CA 92660-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
675.00

Transaction ID : SA17.213756

Date of Receipt
M M / D D / Y Y Y Y
06 22 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **2000.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARK MCCOMISKY

Mailing Address **88 RICHMOND HILL ROAD**

City State Zip Code
GREENWICH CT 06831-2526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213648

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MICHAEL MCLEARN

Mailing Address **39 SEAWATCH DRIVE**

City State Zip Code
SAVANNAH GA 31411-2600

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.213538

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JIM MCMANUS JR.

Mailing Address **88 CHESTNUT ST**

City State Zip Code
WESTON MA 02493-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF COMM. REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Transaction ID : SA17.213435

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **700.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES MIKESH

Mailing Address 251 CRAGMOR DRIVE

City State Zip Code
CLINTON IA 52732-1339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.213661

Date of Receipt
MM / DD / YYYY
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
GLYNNE MILLER

Mailing Address 755 S. EDGEVIEW CIRCLE

City State Zip Code
ANAHEIM CA 92808-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXCEL TIRE & WHEEL SALES/MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.213200

Date of Receipt
MM / DD / YYYY
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. LEE E. MILLER

Mailing Address 42 STATE ROULE 36

City State Zip Code
HIGHLANDS NJ 07732-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213777

Date of Receipt
MM / DD / YYYY
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 375.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
EMIL MONDA

Mailing Address **3 HILLHAVEN RANCH WAY**

City State Zip Code
LAGUNA BEACH CA 92651-6859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213366

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JOHN MORAN

Mailing Address **771 SUPPLEE MILL**

City State Zip Code
LEWISBURG PA 17837-8171

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORAN INDUSTRIES PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.213593

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MRS. MIRIAM HOPE MOSS

Mailing Address **1350 MAIN STREET #1703**

City State Zip Code
ATLANTA GA 30322-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213778

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional)..... **2600.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. TODD F. SHERMAN

Mailing Address **24 BAYBERRY LANE**

City **RYE BROOK** State **NY** Zip Code **10573-1521**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TYREDS FINANCIAL** Occupation **INVESTMENT BANKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213781

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LINDA SOMMER

Mailing Address **1640 PINON GLEN**

City **COLORADO SPRINGS** State **CO** Zip Code **80919-3344**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRIDGE ENERGY** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213901

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MS. CARLA STEARNS

Mailing Address **400 E. 84TH STREET**

City **NEW YORK** State **NY** Zip Code **10028-5606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **LAWYER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.220810A

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

CHARGED BACK \$125.00 ON 06/24/2015

Subtotal Of Receipts This Page (optional)..... **675.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
THOMAS SULLIVAN

Mailing Address **5 HUCKLEBERRY HILL ROAD**

City **WILTON** State **CT** Zip Code **06897-2802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **IMPALA ASSET MANAGEMENT LLC** Occupation **CFO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.213612

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BOB TAYLOR

Mailing Address **2434 BEACON FOREST DR.**

City **CHARLOTTE** State **NC** Zip Code **28270-2262**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TAYLOR PROPERTIES GROUP, LLC** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.213213

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JOHN THONET

Mailing Address **60 NORTH AMHERST ROAD**

City **BEDFORD** State **NH** Zip Code **03110-4900**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STORBRIDGE GLOBAL, INC.** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.213387

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **1525.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ALAN VAUGHT

Mailing Address 7422 CHAPMAN AVENUE

City	State	Zip Code
GARDEN GROVE	CA	92841-2106

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
EVANS MANUFACTURING	MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213177

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. JAMES WATSON

Mailing Address 1221 WEST COAST HWY APT 301

City	State	Zip Code
NEWPORT BEACH	CA	92663-5039

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CT REALTY	REAL ESTATE EXECUTIVE CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213760

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. LOUISE YARBROUGH

Mailing Address 1800 MASON ROAD

City	State	Zip Code
FAIRFIELD	CA	94534-9607

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.213759

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
IRENE ZABARKES

Mailing Address 36 EAST 10TH STREET, APT. 7E

City State Zip Code
NEW YORK NY 10003-6236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213197

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. PETER M. ZUBER

Mailing Address 1180 ASHMOUNT AVENUE

City State Zip Code
PIEDMONT CA 94610-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.213675

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LYNN BABER

Mailing Address P.O. BOX 187

City State Zip Code
WEATHERFORD TX 76086-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF AUTHOR/MINISTRY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213983

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)

LILLIAN BEVIER

Mailing Address 712 RUGBY ROAD

City State Zip Code
CHARLOTTESVILLE VA 22903-1627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U VA LAW SCHOOL LAW PROFESSOR (RETIRED)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.224708

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)

DANIEL BORING

Mailing Address 60593 EAST EAGLE RIDGE DRIVE

City State Zip Code
TUCSON AZ 85739-5945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED POLICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213977

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)

MR. DON L. BRYANT

Mailing Address 13611 MONTFORT AVE.

City State Zip Code
HERALD CA 95638-9723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D2 TRAILER SALES OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.214214

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1150.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BUDDY FESTERLING

Mailing Address 73 PUUHONU PL

City HILO State HI Zip Code 96720-2060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
247.00

Transaction ID : SA17.213936

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MARJORIE MAXWELL

Mailing Address 1902 PHEASANT RIDGE RD

City LEWISBURG State PA Zip Code 17837-7060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.213991

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
RICHARD ODOM

Mailing Address 2333 STAFFORD RD

City THOUSAND OAKS State CA Zip Code 91361-5061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.227375

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JULIA WIEBE

Mailing Address 4520 W BRYCE LANE

City State Zip Code
GLENDALE AZ 85301-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IVERA MEDICAL A 3M COMPANY RN - MEDICAL DEVICE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214206

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
RON COZORT

Mailing Address 5300 TOWN & COUNTRY BLVD

City State Zip Code
FRISCO TX 75034-6894

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLIED INSURANCE AGENCY INC INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.214646

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
STEPHEN DANA

Mailing Address 9072 HILVERSON AVE

City State Zip Code
LAS VEGAS NV 89148-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214597

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 350.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MAUREEN DEAL

Mailing Address 10739S PLEASANT GROVE RD

City State Zip Code
INVERNESS FL 34452-9072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOANDEPOT/MORTGAGE MASTER MORTGAGE UNDERWRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.214587

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
ROGER DORF

Mailing Address 2555 N PEARL

City State Zip Code
DALLAS TX 75201-2243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214510

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
YAAKOV ELKON

Mailing Address 60 HUDSON STREET

City State Zip Code
NEW YORK NY 10013-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GRAPHNET INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.214388

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 725.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RUSSELL HARJU

Mailing Address 305 E 19TH ST.

City	State	Zip Code
COSTA MESA	CA	92627-2348

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIELDPIECE INSTRUMENTS	SALES AND MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214401

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND HENKEL

Mailing Address 4092 S. WABASH STREET

City	State	Zip Code
DENVER	CO	80237-1755

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214583

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
PAUL KINGDBURY

Mailing Address 22981 HWY 135

City	State	Zip Code
CRESTED BUTTE	CO	81224-9602

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214474

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. BARBARA MARCIN

Mailing Address 1 CENTRAL PARK WEST

City State Zip Code
NEW YORK NY 10023-7703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GAMCO FUND MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.214370

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
R LAREE MCGUIRE

Mailing Address 68-337 OLOHIO ST

City State Zip Code
WAIALUA HI 96791-9364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.214233

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DANIEL MOUGHON

Mailing Address 8020 SUNSCAPE LANE

City State Zip Code
FORT WORTH TX 76123-1950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF MEDICARE SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.00

Transaction ID : SA17.214470

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 2825.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
THOMAS ROSS

Mailing Address 114 ROLLING GREEN PLACE

City MISSOULA State MT Zip Code 59803-2435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US ARMY (RETIRED) RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.214309

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
HENRY SALZHAUER

Mailing Address 589 BROADWAY

City NYC State NY Zip Code 10012-3231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BENJAMIN PARTNERS EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.214458

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
KARIN SESIANO

Mailing Address 750 NORTH ROSEMARY DRIVE

City BRYAN State TX Zip Code 77802-4307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TAMU STUDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
213.00

Transaction ID : SA17.227541

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
213.00

Subtotal Of Receipts This Page (optional).....▶ 663.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. CARLA STEARNS

Mailing Address 400 E. 84TH STREET

City State Zip Code
NEW YORK NY 10028-5606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
0.00

Transaction ID : SA17.220810B

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-125.00

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
TERRY TAYLOR

Mailing Address 203 SHERWOOD DRIVE

City State Zip Code
LAURENS SC 29360-2639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.214489

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOSEPH TOMANELLI

Mailing Address 3540 CHAPEL HILL BLVD

City State Zip Code
CLERMONT FL 34711-5731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
T2CPAS LLC CPA/SEMI-RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214248

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 225.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GEORGE VAUGHAN

Mailing Address **8420 CULVER COURT**

City State Zip Code
LAS VEGAS NV 89117-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLVPM.COM OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.214272

Date of Receipt
M M / D D / Y Y Y Y
06 24 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. GEORGE VRADENBURG III

Mailing Address **2901 WOODLAND DRIVE NW**

City State Zip Code
WASHINGTON DC 20008-3542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.214526

Date of Receipt
M M / D D / Y Y Y Y
06 24 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT WEINER

Mailing Address **2 LEIGHTON CT.**

City State Zip Code
ATLANTA GA 30327-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOTALLY ENTERPRISES, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.224646

Date of Receipt
M M / D D / Y Y Y Y
06 24 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **1200.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ROBERT E. YOUNGER

Mailing Address **2236 CENTURY HILL**

City **LOS ANGELES** State **CA** Zip Code **90067-3505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214422

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. KRISTINE AMON

Mailing Address **4 TOLUCA ESTATES DRIVE**

City **TOLUCA LAKE** State **CA** Zip Code **91602-2836**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NOT APPLICABLE** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214901

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. C. NICHOLAS ANTICH

Mailing Address **2165 SPYGLASS HILL**

City **CENTER VALLEY** State **PA** Zip Code **18034-8938**

FEC ID number of contributing federal political committee. **C**

Name of Employer **A D COMPEILER CORP** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.215515

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **600.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. JEAN D. ASHLEY

Mailing Address 1330 UNIVERSITY DRIVE APT. 22

City	State	Zip Code
MENLO PARK	CA	94025-4241

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215496

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. NORMAN BERGUN

Mailing Address 877 E. MARCH LANE APT. 354

City	State	Zip Code
STOCKTON	CA	95207-5878

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215542

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
A J BLANCHARD

Mailing Address 11303 PINEY POINT CIR

City	State	Zip Code
HOUSTON	TX	77024-7415

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214973

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KAREN A BLEDSOE

Mailing Address 700 NW GILMAN BLVD., #445

City ISSAQUAH State WA Zip Code 98027-5395

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214865

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. RANDALL P. BORCHERDING

Mailing Address 155 RETIRO WAY

City SAN FRANCISCO State CA Zip Code 94123-1216

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.215411

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. HAROLD J. BOWEN JR.

Mailing Address 3929 TUXEDO ROAD NORTHWEST

City ATLANTA State GA Zip Code 30342-4035

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.215419

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

Subtotal Of Receipts This Page (optional).....▶ 2700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. W. SAM DENNIS

Mailing Address 2117 KINGSLEA DRIVE

City	State	Zip Code
GAUTIER	MS	39553-1862

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SINGING RIVER HEALTH SYSTEM	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215504

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MANFRED EIMER

Mailing Address 200 HARBOR DRIVE
UNIT 2501

City	State	Zip Code
SAN DIEGO	CA	92101-6857

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214762

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JO FORREST

Mailing Address 8201 SAN DIEGO

City	State	Zip Code
ODESSA	TX	79765-8523

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOME	HOME

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215042

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ALBERT W. FOSTER

Mailing Address 20451 AUDETTE STREET

City State Zip Code
DEARBORN MI 48124-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.215413

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
GAIL GALLEHER

Mailing Address P.O. BOX 240944

City State Zip Code
ANCHORAGE AK 99524-0944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONOCOPHILLIPS BUSINESS ANALYST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Transaction ID : SA17.214727

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
39.00

C. Full Name (Last, First, Middle Initial)
MRS. JANIS F. GLEASON

Mailing Address 90 CORTE PATENCIO

City State Zip Code
GREENBRAE CA 94904-1116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5350.00

Transaction ID : SA17.215057

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2650.00

Subtotal Of Receipts This Page (optional).....▶ 2789.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DR. J. DANIEL HANKS JR.

Mailing Address 39 HUNTINGTON ROAD SW

City	State	Zip Code
ROME	GA	30165-6661

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215530

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
S. DALE HIGH

Mailing Address P.O. BOX 10008

City	State	Zip Code
LANCASTER	PA	17605-0008

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HIGH COMPANY LLC	CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.228227A

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

CHARGED BACK \$500.00 ON 06/29/2015

C. Full Name (Last, First, Middle Initial)
JULIANA IAROSI

Mailing Address 812 GREGG STREET

City	State	Zip Code
COLUMBIA	SC	29201-3926

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNIVERSITY OF SOUTH CAROLINA	UNIVERSITY FACULTY/ANGEL INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.214957

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DAVID JAEGER

Mailing Address **27 GRAND MIRAMAR DR.**

City State Zip Code
HENDERSON NV 89011-2203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.215520

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MS. CYNTHIA G. KINES

Mailing Address **P.O. BOX 1865**

City State Zip Code
STAFFORD VA 22555-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.215558

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
STEVEN LADIK

Mailing Address **7326 LAKEWOOD BLVD.**

City State Zip Code
DALLAS TX 75214-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRAGOMEN, DEL REY, BERNSEN & LOEWY ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
203.00

Transaction ID : SA17.214755

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional)..... **750.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address 415 PATTON COVE

City State Zip Code
BASTROP TX 78602-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.214925

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY G. MOORE

Mailing Address 33801 VIA CAPRI

City State Zip Code
MONARCH BEACH CA 92629-4518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCPHEE AVENUE PARTNERS INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.215407

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES MORSE

Mailing Address P.O. BOX 1741

City State Zip Code
SOUTH BEND IN 46634-1741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215390

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 800.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
NOELLE NGUYEN BORAO

Mailing Address 1010 WILSHIRE BLVD

City State Zip Code
LOS ANGELES CA 90017-5662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EXEC MGMT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214726

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. ANNETTE T. PARKS

Mailing Address 2125 1ST AVENUE #2603

City State Zip Code
SEATTLE WA 98121-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.214826

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS. SIMONE PEARSON

Mailing Address 1853 CENTRAL PARK AVE, 16D

City State Zip Code
YONKERS NY 10710-2909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MONTEFIORE HEALTH SYSTEM RN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.215562

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 4200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
GARY SCHMIDT

Mailing Address **3820 AYERS LANE**

City State Zip Code
CARMEL IN 46033-8412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTERNATIONAL PAPER GENERAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214910

Date of Receipt
M M / D D / Y Y Y Y
06 25 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
D G SEARLE

Mailing Address **316 NEAPOLITAN WAY**

City State Zip Code
NAPLES FL 34103-8558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.214993

Date of Receipt
M M / D D / Y Y Y Y
06 25 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
ROBERT SIMEONE

Mailing Address **942 16TH AVENUE EAST**

City State Zip Code
SEATTLE WA 98112-3918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
823.00

Transaction ID : SA17.214876

Date of Receipt
M M / D D / Y Y Y Y
06 25 2015

CONTRIBUTION

Amount of Each Receipt this Period
270.00

Subtotal Of Receipts This Page (optional).....▶ **3220.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DENNY TODD

Mailing Address 7564 S. BRUCE ST.

City State Zip Code
LAS VEGAS NV 89123-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
425.00

Transaction ID : SA17.214838

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
TRACY TRIBBY

Mailing Address 43491 SAVOY WOODS CT

City State Zip Code
CHANTILLY VA 20152-1941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEVEL 3 SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Transaction ID : SA17.214685

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD WELKOWITZ

Mailing Address 120 NORTH POINTE BLVD. STE. #300

City State Zip Code
LANCASTER PA 17601-4130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CHAIRMAN OF BLACKFORD DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.215561

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 6200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARK WICHMAN

Mailing Address 4414 W. RIVER WILLOWS CT

City State Zip Code
MEQUON WI 53092-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AURORA HEALTHCARE PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.214933

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. ANNA MARIA WILK

Mailing Address 9729 94TH STREET

City State Zip Code
OZONE PARK NY 11416-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
QUALITY INSTALLATIONS SMALL BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.215563

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
W. L. WILSON

Mailing Address 1111 HORIZON DRIVE APT. 802

City State Zip Code
GRAND JUNCTION CO 81506-1454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MINING EXPLORATION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.215481

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. ANN L. WITT

Mailing Address 5132 HUCKLEBERRY CIRCLE

City State Zip Code
HOUSTON TX 77056-2414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Transaction ID : SA17.215439

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
ROBERT YUNA

Mailing Address 37112 VESTA CT

City State Zip Code
MAGNOLIA TX 77355-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEPHZIBAH CORP. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.214802

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BRUCE ZIRINSKY

Mailing Address 13870 WILLISTON WAY

City State Zip Code
NAPLES FL 34119-0919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.214944

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)

STEPHEN ARATA

Mailing Address 5928 GLENDORA AVENUE

City	State	Zip Code
DALLAS	TX	75230-5052

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CAIMAN ENERGY II, LLC	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Transaction ID : SA17.215726

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 900.00

B. Full Name (Last, First, Middle Initial)

CATHERINE BACON

Mailing Address 10901 JUNIPERUS PLACE

City	State	Zip Code
TAMPA	FL	33618-3817

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	BUS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.215679

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)

RICHARD BERRY

Mailing Address 92-2074 KULIHI STREET

City	State	Zip Code
KAPOLEI	HI	96707-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
DOD	CIVIL SERVICE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.215105

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1500.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
FRANK DEVERSE

Mailing Address P O 484

City State Zip Code
GLENBROOK NV 89413-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215622

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
HEIDI GANAHL

Mailing Address 1705 ELDORADO CIR

City State Zip Code
SUPERIOR CO 80027-8279

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAMP BOW WOW CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.215273

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MRS. JANIS F. GLEASON

Mailing Address 90 CORTE PATENCIO

City State Zip Code
GREENBRAE CA 94904-1116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5350.00

Transaction ID : SA17.215067

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2650.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

Subtotal Of Receipts This Page (optional).....▶ 5600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BRIAN HUFFORD

Mailing Address 5034 BEECHTREE CIRCLE

City	State	Zip Code
CARMEL	IN	46033-9723

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HUFFORD CONSULTING, LLC	FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215126

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
THOMAS HUNTER

Mailing Address 940 NORTH MANSFIELD AVE.

City	State	Zip Code
LOS ANGELES	CA	90038-2312

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215586

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MARC IVERSON

Mailing Address 5200 BEVINGTON PLACE

City	State	Zip Code
CHARLOTTE	NC	28277-5504

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DISABLED	DISABLED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.215123

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
TERRY B. KAFKA

Mailing Address 5454 LA SIERRA DR

City	State	Zip Code
DALLAS	TX	75231-2350

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 310.99

Transaction ID : SA17.220783

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 210.99

B. Full Name (Last, First, Middle Initial)
MR. WARREN J. KAPLAN

Mailing Address 15340 PEPPER LANE

City	State	Zip Code
SARATOGA	CA	95070-6427

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TECH CONSULTANT	SUNSET TECH CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 550.00

Transaction ID : SA17.215645

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
BURNELL KELLER

Mailing Address 501 PRIVATE ROAD 4751

City	State	Zip Code
CASTROVILLE	TX	78009-5813

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	GRAIN DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 225.00

Transaction ID : SA17.215376

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 560.99

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
IRVING KESSLER

Mailing Address P.O.BOX 1619

City State Zip Code
LOS ALTOS CA 94023-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215277

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STEVE KNOX

Mailing Address 6806 NW GRAND

City State Zip Code
OKLAHOMA CITY OK 73116-5415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALPINE, INC. INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
563.00

Transaction ID : SA17.215258

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
313.00

C. Full Name (Last, First, Middle Initial)
MRS. JULIA LUTCH

Mailing Address 43577 ALMOND LANE

City State Zip Code
DAVIS CA 95618-5059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
313.00

Transaction ID : SA17.215610

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
13.00

Subtotal Of Receipts This Page (optional).....▶ 576.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL MILLER

Mailing Address 6015 PONDEROSA WAY

City State Zip Code
LAS VEGAS NV 89118-2706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. CUSTOMS & BORDER PROTECTION OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.215683

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
FRANK MULHALL

Mailing Address 11147 SEA GRASS CIRCLE

City State Zip Code
BOCA RATON FL 33498-4916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRANK J MULHALL, PA ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.215153

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOSEPH NETTEMEYER

Mailing Address 2322 LARKSPUR CANYON DR

City State Zip Code
SAN JOSE CA 95138-2459

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PROCESS DISTRIBUTION GROUP PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.215343

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1080.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES WRIGHT

Mailing Address 6506 PATRICK DRIVE

City State Zip Code
DALLAS TX 75214-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Transaction ID : SA17.215728

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
700.00

B. Full Name (Last, First, Middle Initial)
RENE ATAYAN

Mailing Address 5 OVAL COURT

City State Zip Code
BRONXVILLE NY 10708-1412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATAYAN INC MARKETING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.216208

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN W BARNHART JR

Mailing Address 5700 4TH ST. N.

City State Zip Code
SAINT PETERSBURG FL 33703-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JWB MANAGEMENT GROUP, INC. BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.216142

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JAMES BRAUNSCHNEIDER

Mailing Address 41777 PURPOSE WAY

City ALDIE State VA Zip Code 20105-2551

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.216197

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
THOM BRODEUR

Mailing Address 7500 E. MCCORMICK PARKWAY

City SCOTTSDALE State AZ Zip Code 85258-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer DIGITAL AIR STRIKE Occupation COO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.215924

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MIREILLE BUSER

Mailing Address 6132 COPPERHILL DRIVE

City DALLAS State TX Zip Code 75248-4977

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation SOFTWARE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.215951

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ALFRED CAVASIN

Mailing Address 13997 CORNELL RD.

City **CONCORD** State **MI** Zip Code **49237-9504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **CIGAR & RUM TESTER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.215920

Date of Receipt
 M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
DENNIS DUQUETTE

Mailing Address 208 LONGHILL STREET

City **SPRINGFIELD** State **MA** Zip Code **01108-1452**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIDELITY INVESTMENTS** Occupation **VICE PRESIDENT - CORPORATE SPONSORSHIP**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.215912

Date of Receipt
 M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
MRS. CAROL EARNHARDT

Mailing Address 1738 E. 43RD ST

City **DAVENPORT** State **IA** Zip Code **52807-1102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NA** Occupation **HOUSEWIFE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.216017

Date of Receipt
 M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ **750.00**

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CONNIE HUNT

Mailing Address 1 SKYLINE DRIVE

City State Zip Code
MEDFORD OR 97504-8524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215747

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL E. KYLE

Mailing Address 9903 COLONY ROAD

City State Zip Code
FAIRFAX VA 22030-1811

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.215961

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
GAYLE LEE

Mailing Address 549 S. MAIN

City State Zip Code
NAPERVILLE IL 60540-6510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
G. LEE RESOURCES CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.215983

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 325.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)

STEPHEN LEONARD

Mailing Address 3704 E ALTA RIDGE CT

City State Zip Code
BOISE ID 83716-7122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.215962

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)

WILLIAM DOUGLAS LEWIS

Mailing Address 1249 PEACHTREE BATTLE AVE NW

City State Zip Code
ATLANTA GA 30327-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED FROM LUCENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215781

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)

LAURA LOFTIN

Mailing Address 909 CYPRESS KNOLL ROAD

City State Zip Code
HUNTINGTON TX 75949-0260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EDGEAR PROJECT MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.216295

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 325.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. LISA MCBEAN

Mailing Address **38 RUE FONTAINEBLEAU**

City State Zip Code
NEWPORT BEACH CA 92660-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
675.00

Transaction ID : SA17.216074

Date of Receipt
M M / D D / Y Y Y Y
06 27 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
TOM PHILLIPS

Mailing Address **POBOX 1610**

City State Zip Code
GOLETA CA 93116-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.215834

Date of Receipt
M M / D D / Y Y Y Y
06 27 2015

CONTRIBUTION

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
PATRICIA REIGSTAD

Mailing Address **4 AUGUSTA NATIONAL DRIVE**

City State Zip Code
BEDFORD NH 03110-6132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.215831

Date of Receipt
M M / D D / Y Y Y Y
06 27 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional)..... **225.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JEFF VAN DYKE

Mailing Address 8809 CORAL SATIN CT NE

City State Zip Code
ALBUQUERQUE NM 87122-3044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VANDYKE SOFTWARE SOFTWARE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.215832

Date of Receipt
M M / D D / Y Y Y Y
06 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. RANDALL P. BORCHERDING

Mailing Address 155 RETIRO WAY

City State Zip Code
SAN FRANCISCO CA 94123-1216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.216518

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
DAVID CARTMILL

Mailing Address 18 OLD BRIDGE RD

City State Zip Code
BUZZARDS BAY MA 02532-3437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.216471

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SIDNEY GILLIGAN

Mailing Address 4840 S THREE FOUNTAINS DR #171

City	State	Zip Code
MURRAY	UT	84107-5073

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216565

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. CHERYL GOLDENBERG

Mailing Address 40 FIELD LANE

City	State	Zip Code
ROSLYN HEIGHTS	NY	11577-2627

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
GOLDENBERG CONSULTING	CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216355

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
PAUL JOHNSON

Mailing Address 4031 MISCHIRE DR

City	State	Zip Code
HOUSTON	TX	77025-4023

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NONE	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216614

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH LIGUORI

Mailing Address 1271 COCOANUT ROAD

City State Zip Code
BOCA RATON FL 33432-7709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PREMIER ESTATE PROPERTIES BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1050.00

Transaction ID : SA17.216421

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
BRUCE NADEAU

Mailing Address 4943 PARK RD

City State Zip Code
CHARLOTTE NC 28209-3574

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
V-STAX, LLC TECHNOLOGY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.216447

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM NEELY

Mailing Address 8253 JAMIE COURT

City State Zip Code
BRENTWOOD TN 37027-7209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEALTH SERVICES MANAGEMENT, INC. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.216562

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. SUZY S. PENCE

Mailing Address 11776 STRATFORD HOUSE PLACE

City	State	Zip Code
RESTON	VA	20190-3380

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNEMPLOYED	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Transaction ID : SA17.216608

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MAC PURVIS JR

Mailing Address 114 SYLVAN SPRING LN

City	State	Zip Code
VALENCIA	PA	16059-2228

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PURVIS BROTHERS INC	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 225.00

Transaction ID : SA17.216594

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
ADELLA THOMPSON

Mailing Address 13205 VIRTUE RD.

City	State	Zip Code
LENOIR CITY	TN	37772-5371

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	PHOTOGRAPHER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Transaction ID : SA17.216523

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 500.00

Subtotal Of Receipts This Page (optional)..... 1525.00

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MICHAEL TRUEBLOOD

Mailing Address **9 BIENVILLE AVENUE**

City State Zip Code
CAPE GIRARDEAU MO 63701-1944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED SURGEON

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.216428

Date of Receipt
M M / D D / Y Y Y Y
06 28 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. FRED W. ANTON

Mailing Address **7N COLUMBUS BLVD**

City State Zip Code
PHILADELPHIA PA 19106-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.217347

Date of Receipt
M M / D D / Y Y Y Y
06 29 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL AU

Mailing Address **172 E. 64TH STREET**

City State Zip Code
NEW YORK NY 10065-7478

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217488

Date of Receipt
M M / D D / Y Y Y Y
06 29 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **3450.00**

Total This Period (last page this line number only).....

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ROBERT F. BARTHOLOMEW

Mailing Address 23 TIDE WATCH

City	State	Zip Code
NEWPORT COAST	CA	92657-1909

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WINDJAMMER CAPITAL INVESTORS	INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217297B

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. H. JONATHAN BASS

Mailing Address 64 NORTH POLICY STREET

City	State	Zip Code
SALEM	NH	03079-1937

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CARDINAL SHOE CORPORATION	CHIEF OPERATING OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.217229

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MS. JILLIAN B. BASS

Mailing Address 117 THOREAU WAY
APARTMENT 514

City	State	Zip Code
LAWRENCE	MA	01843-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CARDINAL SHOE CORPORATION	CHIEF ADMINISTRATIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.217228

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

Subtotal Of Receipts This Page (optional).....▶ 5000.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. MARY ANN BROWN

Mailing Address 304 WEYMOUTH PLACE

City State Zip Code
LAGUNA BEACH CA 92651-1455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PACIFIC LIFE ACTUARY - EVP

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217516

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. ROSS E. BROWN

Mailing Address 10414 DAKINS DRIVE

City State Zip Code
NORTH CHESTERFIELD VA 23236-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.217342

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
WINIFRED BROWN

Mailing Address 212 AUDUBON BLVD

City State Zip Code
NEW ORLEANS LA 70118-5542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HANSEL BROWN CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1250.00

Transaction ID : SA17.220793

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1750.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KATHRYN A CARTER

Mailing Address 585 COUNTY ROAD 4164

City State Zip Code
PITTSBURG TX 75686-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHEAST TEXAS COMMUNITY COLLEGE PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.217502

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. TRISHA CHILCUTT

Mailing Address 127 ROUTT

City State Zip Code
SAN ANTONIO TX 78209-4676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PROPERTY MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.216832

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BRETT E. CRAIG

Mailing Address 432 FULLERTON AVENUE

City State Zip Code
NEWPORT BEACH CA 92663-5132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217289

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER:
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. VICTORIA CUBEIRO

Mailing Address 531 HARBOR ISLAND DRIVE

City	State	Zip Code
NEWPORT BEACH	CA	92660-7225

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
WWW.ADORNAMENT.NET	JEWELRY DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217295

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
MR. JOHN DANCY

Mailing Address 1704 ESPLANADE
APARTMENT B.

City	State	Zip Code
REDONDO BEACH	CA	90277-5383

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217329

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="300.00"/>

C. Full Name (Last, First, Middle Initial)
MR. STEVEN C. DENNIS

Mailing Address 1931 PORT TOWNSEND CIRCLE

City	State	Zip Code
NEWPORT BEACH	CA	92660-6607

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	MEDICAL DOCTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217304

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. HUDSON B. DRAKE

Mailing Address 1707 SOLEDAD AVENUE

City	State	Zip Code
LA JOLLA	CA	92037-3819

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217305

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. DOUG EAMES

Mailing Address 1385 WEST COACH ROAD

City	State	Zip Code
BOULDER	CO	80302-9475

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217223

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. LESLIE M. ELLIS

Mailing Address 219 VIA DIJON

City	State	Zip Code
NEWPORT BEACH	CA	92663-4630

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	REAL ESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217519

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DON ESTES

Mailing Address 1000 E ASH LN

City State Zip Code
EULESS TX 76039-4773

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.217149

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
DR. PETER C. FARRELL

Mailing Address 7220 ROMERO DRIVE

City State Zip Code
LA JOLLA CA 92037-5633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RESMED CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217509

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DR. PETER C. FARRELL

Mailing Address 7220 ROMERO DRIVE

City State Zip Code
LA JOLLA CA 92037-5633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RESMED CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217510

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
700.00

Subtotal Of Receipts This Page (optional).....▶ 1725.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. FASO

Mailing Address P.O. BOX 474

City State Zip Code
KINDERHOOK NY 12106-0474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.217487

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ALAN FIELDS

Mailing Address 2828 COCHRAN ST. #501

City State Zip Code
SIMI VALLEY CA 93065-2780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.216675

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. ALEX FLACK

Mailing Address 19 SHRINE VIEW

City State Zip Code
DALLAS PA 18612-9213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KEYSTONE ENERGY OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.217483

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 1500.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. TOM P. GABLE

Mailing Address 14947 RANCHO REAL

City	State	Zip Code
DEL MAR	CA	92014-4213

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NUFFER, SMITH, TUCKER P.R.	VICE CHAIR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217512

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MARK GOETTING

Mailing Address 8636 MARICOPA TRAIL

City	State	Zip Code
KALAMAZOO	MI	49009-4925

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BRONSON METHODIST HOSPITAL	PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216960

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GUY A. GOTTSCHALK

Mailing Address 412 DALY AVENUE

City	State	Zip Code
WISCONSIN RAPIDS	WI	54494-4744

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
GOTTSCHALK CRANBERRY, INC.	FARMER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216697

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DANIEL GREENE

Mailing Address P.O. BOX 1232

City State Zip Code
ROSEVILLE CA 95678-8232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED LAYMAN MISSIONARY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.216935

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
TOM GUARENTE

Mailing Address 21120 ENDSLEY AVE

City State Zip Code
ROCKY RIVER OH 44116-2229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FIREEYE SALES DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.216913

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOE HARDIN

Mailing Address 820 PICACHO LANE

City State Zip Code
SANTA BARBARA CA 93108-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.217110

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 775.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)

MR. MARTIN AARON HARMON

Mailing Address 4020 SIERRA COLLEGE BLVD. #200

City	State	Zip Code
ROCKLIN	CA	95677-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WESTERN CARE CONSTRUCTION CO.	EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5400.00

Transaction ID : SA17.217292

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2700.00

B. Full Name (Last, First, Middle Initial)

MR. RON HARRIS

Mailing Address 10624 MIDWAY AVENUE

City	State	Zip Code
CERRITOS	CA	90703-1522

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BETTER BEVERAGES	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.217514

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)

MR. CLINT HASKELL

Mailing Address 806 N. LEONARD AVENUE

City	State	Zip Code
FRESNO	CA	93737-9510

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
ALLIANT INSURANCE SERVICES	INSURANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.217302

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

Subtotal Of Receipts This Page (optional).....▶ _____ 4200.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
S. DALE HIGH

Mailing Address P.O. BOX 10008

City State Zip Code
LANCASTER PA 17605-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HIGH COMPANY LLC CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.228227B

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-500.00

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
MS. LISA O. HILLGREN

Mailing Address 1978 PORT LAURENT

City State Zip Code
NEWPORT BEACH CA 92660-7117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DESIGNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.217518

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SUSIE HOELLER

Mailing Address 2845 DEVONOAK BLVD

City State Zip Code
LAND O LAKES FL 34638-4368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOELLER LAW FIRM ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.217047

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 525.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM KYTE

Mailing Address 20938 NORTH 102ND. ST.

City State Zip Code
SCOTTSDALE AZ 85255-3776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RCM INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.216854

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. KEVIN C. LEADER

Mailing Address 6251 ACACIA AVENUE

City State Zip Code
OAKLAND CA 94618-1851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BECHTEL GROUP VICE PRESIDENT & TREASURER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217520

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MS. MARILYN SHIRLENE LOPEZ

Mailing Address 4 BRUMBY

City State Zip Code
COTO DE CAZA CA 92679-4949

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217298

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 6400.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. SEYMOUR LOTSOFF

Mailing Address P.O. BOX 9510

City State Zip Code
RANCHO SANTA FE CA 92067-4510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOTSOFF CAPITAL MANGEMENT INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.217290

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES MICHAEL LOVE

Mailing Address 659 HUNTERS LANE

City State Zip Code
LEWISBERRY PA 17339-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J MICHAEL LOVE CONSULTING CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Transaction ID : SA17.228224B

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2000.00

CHARGED BACK

C. Full Name (Last, First, Middle Initial)
MR. MARY PAT LUCAS

Mailing Address 2907 PEBBLE DRIVE

City State Zip Code
CORONA DEL MAR CA 92625-1518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LUCAS GENERAL CONTRACTING PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.217306

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ **-1000.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) MR. TIMOTHY MADDERN		Transaction ID : SA17.217315 Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 1830 CAMPHOR COURT City MILPITAS State CA Zip Code 95035-6707		CONTRIBUTION Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer TRIMBE M.A.S.	Occupation MECH DESIGNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) MR. MICHAEL D. MADIGAN		Transaction ID : SA17.217283 Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 877 ISLAND AVENUE #508 City SAN DIEGO State CA Zip Code 92101-7151		CONTRIBUTION Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation CONSULTANT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) SAMUEL MASLAK		Transaction ID : SA17.216824 Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address P.O. BOX 1730 City VAIL State CO Zip Code 81658-1730		CONTRIBUTION Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Subtotal Of Receipts This Page (optional).....▶ 975.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARJORIE MAXWELL

Mailing Address 1902 PHEASANT RIDGE RD

City	State	Zip Code
LEWISBURG	PA	17837-7060

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
HOMEMAKER	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.216968

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 50.00

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW MCCLUGGAGE

Mailing Address 4110 WOODLEIGH LANE

City	State	Zip Code
LA CANADA	CA	91011-4055

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
UNIVERSAL TV/NBC	TV POST PRODUCTION

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.217517

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
R LAREE MCGUIRE

Mailing Address 68-337 OLOHIO ST

City	State	Zip Code
WAIALUA	HI	96791-9364

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	ATTY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.217466

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 400.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JANIE MERKLE

Mailing Address **6 WILLIAMSBURG**

City State Zip Code
IRVINE CA 92620-2658

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REMAX FINE HOMES INTERNATIONAL REAL ESTATE CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217307

Date of Receipt
M M / D D / Y Y Y Y
06 29 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. NORMAN J. METCALFE

Mailing Address **2007 BAYADERE TERRACE**

City State Zip Code
CORONA DEL MAR CA 92625-1812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.217284

Date of Receipt
M M / D D / Y Y Y Y
06 29 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS. SHELLEY VAN ACKER MEUSER

Mailing Address **100 OLD FIELD ROAD**

City State Zip Code
SHAVERTOWN PA 18708-9420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17.217481

Date of Receipt
M M / D D / Y Y Y Y
06 29 2015

CONTRIBUTION

Amount of Each Receipt this Period
2500.00

Subtotal Of Receipts This Page (optional).....▶ **3750.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. STANLEY E. MEUSER

Mailing Address **5050 NORTH OCEAN DRIVE**

City **SINGER ISLAND** State **FL** Zip Code **33404-2698**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100 2101 2102 2103 2104 2105 2106 2107 2108 2109 2110 2111 2112 2113 2114 2115 2116 2117 2118 2119 2120 2121 2122 2123 2124 2125 2126 2127 2128 2129 2130 2131 2132 2133 2134 2135 2136 2137 2138 2139 2140 2141 2142 2143 2144 2145 2146 2147 2148 2149 2150 2151 2152 2153 2154 2155 2156 2157 2158 2159 2160 2161 2162 2163 2164 2165 2166 2167 2168 2169 2170 2171 2172 2173 2174 2175 2176 2177 2178 2179 2180 2181 2182 2183 2184 2185 2186 2187 2188 2189 2190 2191 2192 2193 2194 2195 2196 2197 2198 2199 2200 2201 2202 2203 2204 2205 2206 2207 2208 2209 2210 2211 2212 2213 2214 2215 2216 2217 2218 2219 2220 2221 2222 2223 2224 2225 2226 2227 2228 2229 2230 2231 2232 2233 2234 2235 2236 2237 2238 2239 2240 2241 2242 2243 2244 2245 2246 2247 2248 2249 2250 2251 2252 2253 2254 2255 2256 2257 2258 2259 2260 2261 2262 2263 2264 2265 2266 2267 2268 2269 2270 2271 2272 2273 2274 2275 2276 2277 2278 2279 2280 2281 2282 2283 2284 2285 2286 2287 2288 2289 2290 2291 2292 2293 2294 2295 2296 2297 2298 2299 2300 2301 2302 2303 2304 2305 2306 2307 2308 2309 2310 2311 2312 2313 2314 2315 2316 2317 2318 2319 2320 2321 2322 2323 2324 2325 2326 2327 2328 2329 2330 2331 2332 2333 2334 2335 2336 2337 2338 2339 2340 2341 2342 2343 2344 2345 2346 2347 2348 2349 2350 2351 2352 2353 2354 2355 2356 2357 2358 2359 2360 2361 2362 2363 2364 2365 2366 2367 2368 2369 2370 2371 2372 2373 2374 2375 2376 2377 2378 2379 2380 2381 2382 2383 2384 2385 2386 2387 2388 2389 2390 2391 2392 2393 2394 2395 2396 2397 2398 2399 2400 2401 2402 2403 2404 2405 2406 2407 2408 2409 2410 2411 2412 2413 2414 2415 2416 2417 2418 2419 2420 2421 2422 2423 2424 2425 2426 2427 2428 2429 2430 2431 2432 2433 2434 2435 2436 2437 2438 2439 2440 2441 2442 2443 2444 2445 2446 2447 2448 2449 2450 2451 2452 2453 2454 2455 2456 2457 2458 2459 2460 2461 2462 2463 2464 2465 2466 2467 2468 2469 2470 2471 2472 2473 2474 2475 2476 2477 2478 2479 2480 2481 2482 2483 2484 2485 2486 2487 2488 2489 2490 2491 2492 2493 2494 2495 2496 2497 2498 2499 2500 2501 2502 2503 2504 2505 2506 2507 2508 2509 2510 2511 2512 2513 2514 2515 2516 2517 2518 2519 2520 2521 2522 2523 2524 2525 2526 2527 2528 2529 2530 2531 2532 2533 2534 2535 2536 2537 2538 2539 2540 2541 2542 2543 2544 2545 2546 2547 2548 2549 2550 2551 2552 2553 2554 2555 2556 2557 2558 2559 2560 2561 2562 2563 2564 2565 2566 2567 2568 2569 2570 2571 2572 2573 2574 2575 2576 2577 2578 2579 2580 2581 2582 2583 2584 2585 2586 2587 2588 2589 2590 2591 2592 2593 2594 2595 2596 2597 2598 2599 2600 2601 2602 2603 2604 2605 2606 2607 2608 2609 2610 2611 2612 2613 2614 2615 2616 2617 2618 2619 2620 2621 2622 2623 2624 2625 2626 2627 2628 2629 2630 2631 2632 2633 2634 2635 2636 2637 2638 2639 2640 2641 2642 2643 2644 2645 2646 2647 2648 2649 2650 2651 2652 2653 2654 2655 2656 2657 2658 2659 2660 2661 2662 2663 2664 2665 2666 2667 2668 2669 2670 2671 2672 2673 2674 2675 2676 2677 2678 2679 2680 2681 2682 2683 2684 2685 2686 2687 2688 2689 2690 2691 2692 2693 2694 2695 2696 2697 2698 2699 2700 2701 2702 2703 2704 2705 2706 2707 2708 2709 2710 2711 2712 2713 2714 2715 2716 2717 2718 2719 2720 2721 2722 2723 2724 2725 2726 2727 2728 2729 2730 2731 2732 2733 2734 2735 2736 2737 2738 2739 2740 2741 2742 2743 2744 2745 2746 2747 2748 2749 2750 2751 2752 2753 2754 2755 2756 2757 2758 2759 2760 2761 2762 2763 2764 2765 2766 2767 2768 2769 2770 2771 2772 2773 2774 2775 2776 2777 2778 2779 2780 2781 2782 2783 2784 2785 2786 2787 2788 2789 2790 2791 2792 2793 2794 2795 2796 2797 2798 2799 2800 2801 2802 2803 2804 2805 2806 2807 2808 2809 2810 2811 2812 2813 2814 2815 2816 2817 2818 2819 2820 2821 2822 2823 2824 2825 2826 2827 2828 2829 2830 2831 2832 2833 2834 2835 2836 2837 2838 2839 2840 2841 2842 2843 2844 2845 2846 2847 2848 2849 2850 2851 2852 2853 2854 2855 2856 2857 2858 2859 2860 2861 2862 2863 2864 2865 2866 2867 2868 2869 2870 2871 2872 2873 2874 2875 2876 2877 2878 2879 2880 2881 2882 2883 2884 2885 2886 2887 2888 2889 2890 2891 2892 2893 2894 2895 2896 2897 2898 2899 2900 2901 2902 2903 2904 2905 2906 2907 2908 2909 2910 2911 2912 2913 2914 2915 2916 2917 2918 2919 2920 2921 2922 2923 2924 2925 2926 2927 2928 2929 2930 2931 2932 2933 2934 2935 2936 2937 2938 2939 2940 2941 2942 2943 2944 2945 2946 2947 2948 2949 2950 2951 2952 2953 2954 2955 2956 2957 2958 2959 2960 2961 2962 2963 2964 2965 2966 2967 2968 2969 2970 2971 2972 2973 2974 2975 2976 2977 2978 2979 2980 2981 2982 2983 2984 2985 2986 2987 2988 2989 2990 2991 2992 2993 2994 2995 2996 2997 2998 2999 3000 3001 3002 3003 3004 3005 3006 3007 3008 3009 3010 3011 3012 3013 3014 3015 3016 3017 3018 3019 3020 3021 3022 3023 3024 3025 3026 3027 3028 3029 3030 3031 3032 3033 3034 3035 3036 3037 3038 3039 3040 3041 3042 3043 3044 3045 3046 3047 3048 3049 3050 3051 3052 3053 3054 3055 3056 3057 3058 3059 3060 3061

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. DAVID G. MOORE

Mailing Address 88 LINDA ISLE

City State Zip Code
NEWPORT BEACH CA 92660-7209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MACH CONSULTING CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217285

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
MRS. KATHRYN K. MOORE

Mailing Address 88 LINDA ISLE

City State Zip Code
NEWPORT BEACH CA 92660-7209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MY STYLE 2020 C.E.O.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217308B

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
-2700.00

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
MARIAN NISHI

Mailing Address 9857 RAVARI DR.

City State Zip Code
CYPRESS CA 90630-3554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Transaction ID : SA17.217411

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 100.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
HUGH RANDOLPH

Mailing Address 3908 CHANNEL PL..NEWPORT BEACH CA.

City	State	Zip Code
NEWPORT BEACH	CA	92658-

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	FIREFIGHTER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217707

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ELEANOR RATHS

Mailing Address 1144 GRANNY WHITE COURT

City	State	Zip Code
NASHVILLE	TN	37204-4115

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MUSIC OF THE BAROQUE	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217169

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JOHN B. REILLY III

Mailing Address 1577 SAUCON VALLEY ROAD

City	State	Zip Code
BETHLEHEM	PA	18015-5259

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CITY CENTER INVESTMENT CORPORATION	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217482

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RON ROCK

Mailing Address **E. 1593 POLSTON AVE.**

City	State	Zip Code
POST FALLS	ID	83854-5326

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
EMPLOYER *SELF	OCCUPATION *RETIRED CRNA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.224688

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD K. ROEDER

Mailing Address **11150 SANTA MONICA BLVD.
SUITE 750**

City	State	Zip Code
LOS ANGELES	CA	90025-0528

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
VANCE STREET CAPITAL	PARTNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Transaction ID : SA17.217522

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 2700.00

C. Full Name (Last, First, Middle Initial)
VIRGINIA DEMINT RUSHING

Mailing Address **8531 FOX TAIL LANE**

City	State	Zip Code
HUNTERSVILLE	NC	28078-4507

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NONE	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.217852

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

Subtotal Of Receipts This Page (optional).....▶ _____ 3200.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. RONALD P. SANDMEYER JR.

Mailing Address 10001 SANDMEYER LANE

City	State	Zip Code
PHILADELPHIA	PA	19116-3501

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SANDMEYER STEEL COMPANY	C.E.O.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217351

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS. CYNTHIA SAYRE

Mailing Address 4020 SIERRA COLLEGE BLVD.
SUITE 200

City	State	Zip Code
ROCKLIN	CA	95677-3906

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
WESTERN CARE	CHILDRENS ORPHANAGE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217293

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. SUE D. SCHICK

Mailing Address 1220 DENBIGH

City	State	Zip Code
WAYNE	PA	19087-4644

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
UNITED HEALTH CARE	MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217350

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. NICK SEARCY

Mailing Address **813 N. PASS AVENUE**

City **BURBANK** State **CA** Zip Code **91505-2702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ACTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17.216688

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
ROBERT SEKLEMIAN

Mailing Address **4505 S UNIT 124**

City **DENVER** State **CO** Zip Code **80237-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RITIED** Occupation **GEOLOGIST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Transaction ID : SA17.217664

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID SELVERS

Mailing Address **42 E. 20TH STREET APT. 5B**

City **NEW YORK** State **NY** Zip Code **10003-1344**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **FINANCIAL ANALYST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217486

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **850.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WALTER SEWARD

Mailing Address 1919 WILLOWGREEN DR

City State Zip Code
BEAVERCREEK OH 45432-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.217692

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
RICHARD SHAFFER

Mailing Address 457 PEMBERTON RD

City State Zip Code
KENNETT SQUARE PA 19348-2293

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
400.00

Transaction ID : SA17.216764

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
WILMA SINCLAIR

Mailing Address 764 SUTRO AVENUE

City State Zip Code
NOVATO CA 94947-1950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
342.00

Transaction ID : SA17.217061

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 400.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. KAREN A. SPENCER

Mailing Address 5286 E. HOME AVENUE

City State Zip Code
FRESNO CA 93727-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217288

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD F. SPENCER

Mailing Address 5286 E. HOME AVENUE

City State Zip Code
FRESNO CA 93727-2103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SPENCER ENTERPRISES, INC. PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.217287

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. SHAWN STEEL

Mailing Address 27520 HAWTHORNE BLVD.
SUITE 270 SUITE 270

City State Zip Code
PALOS VERDES PENIN CA 90274-3553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHAWN STEEL & ASSOCIATES ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.217309

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

Subtotal Of Receipts This Page (optional).....▶ 7400.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. ADAM B. STERN

Mailing Address 23673 MALIBU COLONY ROAD

City	State	Zip Code
MALIBU	CA	90265-6628

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ARISTEIA CAPITAL	MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217526

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. ERIKA ARONSON STERN

Mailing Address 23673 MALIBU COLONY ROAD

City	State	Zip Code
MALIBU	CA	90265-6628

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217524

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JEREMY TAYLOR

Mailing Address 9802 FM 1960 BYPASS RD, WEST

City	State	Zip Code
HUMBLE	TX	77338-3501

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PENN COMPANIES	HEALTHCARE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216796

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
SHERRARD WALLINGFORD

Mailing Address 25 COVENTRY CT

City State Zip Code
PRAIRIE VILLAGE KS 66208-5226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NA NA

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
263.00

Transaction ID : SA17.217597

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. HELGA M. WARNER

Mailing Address P.O. BOX 2929

City State Zip Code
LA JOLLA CA 92038-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217310

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. WARNER JR.

Mailing Address P.O. BOX 2929

City State Zip Code
LA JOLLA CA 92038-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN-RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217294

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MARK WELP

Mailing Address 7108 BAREFOOT COVE

City	State	Zip Code
AUSTIN	TX	78730-1524

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216964

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
HERSCHEL WILLIAMS

Mailing Address 9453 JAMAICA BEACH

City	State	Zip Code
GALVESTON	TX	77554-8602

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF/INTEGRAL SALES, LLC	OWNER/SALESMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.216839

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. MIREILLE L. WOLFE

Mailing Address 22578 FLAMINGO STREET

City	State	Zip Code
WOODLAND HILLS	CA	91364-4916

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217511

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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Detailed Summary Page

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. ANN S. WOMBLE

Mailing Address 1520 RIDGE RD

City State Zip Code
LANCASTER PA 17603-4738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.217346

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JOHN WYMER

Mailing Address 243 CHASTAIN COMMONS

City State Zip Code
ATLANTA GA 30342-3615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHERMAN & HOWARD LLC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.216972

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
MS. CELINE S. YOUSEFZADEH

Mailing Address P.O. BOX 99272

City State Zip Code
LOS ANGELES CA 90049-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STUDENT STUDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217301

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional).....▶ 1375.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
STEPHEN ARATA

Mailing Address 5928 GLENDORA AVENUE

City State Zip Code
DALLAS TX 75230-5052

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAIMAN ENERGY II, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.218894

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. LINDA L. BEAN

Mailing Address 30-32 SCHOOL STREET

City State Zip Code
ROCKLAND ME 04841-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LINDA BEAN'S MAINE LOBSTER MSC CERTIFIED MAINE LOBSTER DEALER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Transaction ID : SA17.220459

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

C. Full Name (Last, First, Middle Initial)
MS. LYDIA I. BEEBE

Mailing Address 125 SAN FELIPE WAY

City State Zip Code
SAN FRANCISCO CA 94127-2047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHEVRON CORP. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.219189

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 3700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. KATHY BENNETT

Mailing Address 351 NE SAINT ANDREWS CIR

City State Zip Code
LEES SUMMIT MO 64064-1369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BENNETT PACKAGING BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.218439

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT J. BISHOP

Mailing Address 628 WEST RD

City State Zip Code
NEW CANAAN CT 06840-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IMPALA ASSET MANAGEMENT PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.219030

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
KEITH BRADLEY

Mailing Address P.O. BOX 393

City State Zip Code
CHATHAM MA 02633-0393

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BROADMEADOW REALTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.219362

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 4225.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR FRANCIS C BRULENSKI

Mailing Address 1600 Market Street

City State Zip Code
PHILADELPHIA PA 19103-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.220443

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM BUSH

Mailing Address 3435 RIDGEWOOD ROAD, NW

City State Zip Code
ATLANTA GA 30327-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ASPEN PARTNERS, LTD. FINANCIAL SERVICES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.218947

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ZACHARY CALDWELL

Mailing Address 7017 TUSCANY WAY

City State Zip Code
EL DORADO HILLS CA 95762-5410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GODGIVEN FIRST AMENDMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.219414

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 625.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. CHARLES GRIFFIN CALE

Mailing Address 449 N. ROCKINGHAM AVENUE

City State Zip Code
LOS ANGELES CA 90049-2637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PRIVATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5400.00

Transaction ID : SA17.220142

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
5400.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

B. Full Name (Last, First, Middle Initial)
JEAN CARD

Mailing Address 2203 LA GRANDE AVE.

City State Zip Code
ALEXANDRIA VA 22301-1221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF/JEAN CARD INK CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218819

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM D CARR

Mailing Address 10222 SW 228TH STREET

City State Zip Code
VASHON WA 98070-7089

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PSYCHOTHERAPIST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.218533

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 5600.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KATHRYN A CARTER

Mailing Address 585 COUNTY ROAD 4164

City State Zip Code
PITTSBURG TX 75686-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NORTHEAST TEXAS COMMUNITY COLLEGE PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.219083

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. MARY CASTAGNOZZI

Mailing Address 129 HILLSIDE AVENUE

City State Zip Code
PIEDMONT CA 94611-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.219418

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER CATOE

Mailing Address 333 MURFREESBORO PIKE

City State Zip Code
NASHVILLE TN 37210-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LANDRY'S INC RETAIL SALES ASSOCIATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218365

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 450.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL S. CHERNOFF

Mailing Address **615 ARTWOOD DRIVE**

City **PHILADELPHIA** State **PA** Zip Code **19115-2826**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FAIRFIELD FINANCIAL GROUP** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Transaction ID : SA17.220440

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
MRS. JOAN CLAWSON

Mailing Address **1411 1/2 N. BAYFRONT**

City **NEWPORT BEACH** State **CA** Zip Code **92662-6427**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.220145

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
O BRUCE COFFMAN

Mailing Address **1020 LABARRE STREET**

City **MANDEVILLE** State **LA** Zip Code **70448-4212**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AMERICA'S MORTGAGE RESOURCE, INC.** Occupation **MORTGAGE BANKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Transaction ID : SA17.219666

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 1350.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RANDY CORPORON

Mailing Address **7775 S BISCAY ST**

City State Zip Code
CENTENNIAL CO 80016-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LAW OFFICES OF RANDY B CORPORON PC LAWYER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.219563

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM CUMBELICH

Mailing Address **33 BELLEVUE AVE**

City State Zip Code
PIEDMONT CA 94611-3501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE CAC GROUP BUSINESSMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.220131

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
JOSEPH DE LA TORRE

Mailing Address **9185 MUIR WAY**

City State Zip Code
GRANITE BAY CA 95746-9678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE OF CALIFORNIA MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
213.00

Transaction ID : SA17.219537

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ **3000.00**

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JOHN O. ENANDER

Mailing Address 1400 CASEY KEY ROAD

City State Zip Code
NOKOMIS FL 34275-3366

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219020

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>

B. Full Name (Last, First, Middle Initial)
MS. JULIA J. FANCELLI

Mailing Address 2000 EAST EDGEWOOD DRIVE
SUITE 102

City State Zip Code
LAKELAND FL 33803-3600

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VICE PRESIDENT ALMA FOOD IMPORTS, INC.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.220034

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>

C. Full Name (Last, First, Middle Initial)
ALEXIS FASSEAS

Mailing Address 1117 W ARMITAGE

City State Zip Code
CHICAGO IL 60614-4150

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF BUSINESS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219841

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JOHN FEHSENFELD

Mailing Address P.O. BOX 35200

City State Zip Code
LAS VEGAS NV 89133-5200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.219927

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
BUDDY FESTERLING

Mailing Address 73 PUUHONU PL

City State Zip Code
HILO HI 96720-2060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
247.00

Transaction ID : SA17.217945

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
GINNY FEY

Mailing Address 224 E BAY BLVD S

City State Zip Code
TRAVERSE CITY MI 49686-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
450.00

Transaction ID : SA17.218558

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 200.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
JANIS FITZGERALD

Mailing Address 4834 ELKHORN HILL DR

City	State	Zip Code
SUWANEE	GA	30024-4148

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 700.00

Transaction ID : SA17.218920

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
MR. ALBERT W. FOSTER

Mailing Address 20451 AUDETTE STREET

City	State	Zip Code
DEARBORN	MI	48124-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.219937

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
JOHN FOWLER

Mailing Address 10338 CR 312

City	State	Zip Code
LLANO	TX	78643-

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF	RETIRED ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Transaction ID : SA17.218412

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LISA GALLAGHER

Mailing Address **4 PERKINS WAY**

City **NEWBURYPORT** State **MA** Zip Code **01950-4016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAWTAN LEATHERS LLC** Occupation **LEATHER MANUFACTURER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.218692

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
GAIL GALLEHER

Mailing Address **P.O. BOX 240944**

City **ANCHORAGE** State **AK** Zip Code **99524-0944**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CONOCOPHILLIPS** Occupation **BUSINESS ANALYST**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
234.00

Transaction ID : SA17.219133

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
113.00

C. Full Name (Last, First, Middle Initial)
LINDA GEBHARDT

Mailing Address **9525 SEMIAHMOO PKWY**

City **BLAINE** State **WA** Zip Code **98230-4310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NA** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.219196

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional)..... **1363.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MS. GEORGETTE GELBARD

Mailing Address 4712 PARK ENCINO LANE #321

City	State	Zip Code
ENCINO	CA	91436-3273

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	PUBLIC RELATIONS

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>
<input type="checkbox"/> Other (specify) ▼	

Transaction ID : SA17.220132

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. CHARLES R. GEROW

Mailing Address 4725 CHARLES ROAD

City	State	Zip Code
MECHANICSBURG	PA	17050-3033

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2700.00"/>
<input type="checkbox"/> Other (specify) ▼	

Transaction ID : SA17.220444

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BETSY GODFREY

Mailing Address 300 S. INTERLACHEN AV.

City	State	Zip Code
WINTER PARK	FL	32789-4473

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
GODFREY DESIGN CONSULTANTS	INTERIOR DESIGNER

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>
<input type="checkbox"/> Other (specify) ▼	

Transaction ID : SA17.218218

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
RUSSELL HARJU

Mailing Address 305 E 19TH ST.

City	State	Zip Code
COSTA MESA	CA	92627-2348

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIELDPIECE INSTRUMENTS	SALES AND MARKETING MANAGER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218939

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. DOUGLAS A. HARRIS

Mailing Address 1212 GREAT OAKS WAY

City	State	Zip Code
KNOXVILLE	TN	37909-3729

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HARRIS RESTAURANT GROUP	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.220035

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. HAWK

Mailing Address 25 DOWNING STREET 1-PH 1

City	State	Zip Code
DENVER	CO	80218-3467

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HAWK COMMUNICATIONS	OWNER/INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.220139

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. GAVIN S. HERBERT

Mailing Address 4100 CALLE ISABELLA

City State Zip Code
SAN CLEMENTE CA 92672-4568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.220105

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JARRETT E HODGE

Mailing Address 4012 KING ARTHUR PL

City State Zip Code
COLUMBUS GA 31907-1132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SALES

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218512

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SYDNEY HOLLAND

Mailing Address 14074 AUBREY ROAD

City State Zip Code
BEVERLY HILLS CA 90210-1064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PRODUCER/REAL ESTATE INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.220133

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional).....▶ 5650.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
R. JACKSON

Mailing Address 215 STAGELINE

City State Zip Code
WHITEFISH MT 59937-8467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.218222

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RICHARD JAHNS

Mailing Address 6344 BAY RIDGE DRIVE

City State Zip Code
PETOSKEY MI 49770-8453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.217987

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CAROL JOHNSON

Mailing Address 2945 SILO COURT

City State Zip Code
ANDERSON CA 96007-3673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE MISSION SOCIETY CROSS CULTURAL WORKER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
225.00

Transaction ID : SA17.218065

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
125.00

Subtotal Of Receipts This Page (optional).....▶ 875.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. WARREN J. KAPLAN

Mailing Address 15340 PEPPER LANE

City	State	Zip Code
SARATOGA	CA	95070-6427

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TECH CONSULTANT	SUNSET TECH CONSULTING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17.218871

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
KORT KINNEY

Mailing Address 315 COUNTRY CLUB DRIVE

City	State	Zip Code
RIVERTON	WY	82501-6202

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
FREMONT CHEVROLET BUICK GMC	GSM

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.219691

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ANTHONY KINNINGER

Mailing Address 2108 CATON WAY SW

City	State	Zip Code
OLYMPIA	WA	98502-1105

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
1,000	FINANCE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.218998

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
KEVIN LARKIN

Mailing Address **28655 OLD TOWNE ROAD**

City **CHISAGO CITY** State **MN** Zip Code **55013-9504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **POWER DYNAMICS, INC.** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.218040

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT E. LATHAM

Mailing Address **712 ARLINGTON ROAD**

City **CAMP HILL** State **PA** Zip Code **17011-1603**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ASSOCIATED PENNSYLVANIA CONSTRUCTORS** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.220442

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SUSAN LAUE

Mailing Address **4902 FIRESTONE DRIVE**

City **COLLEGE STATION** State **TX** Zip Code **77845-8926**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MYSELF** Occupation **CITIZEN**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.219427

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1250.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CHARLES LEE

Mailing Address P.O. BOX 845

City LIBERTY HILL State TX Zip Code 78642-0845

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.224687

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOAN LEE

Mailing Address 3610 EL JAMES DRIVE

City SPRING State TX Zip Code 77388-5027

FEC ID number of contributing federal political committee. **C**

Name of Employer GOODRICH OPERATING CO., INC. Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17.218214

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM DOUGLAS LEWIS

Mailing Address 1249 PEACHTREE BATTLE AVE NW

City ATLANTA State GA Zip Code 30327-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED FROM LUCENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218277

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

Subtotal Of Receipts This Page (optional).....▶ 550.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
WILLIAM LICHTY

Mailing Address 2326 S 128TH ST

City	State	Zip Code
BURIEN	WA	98168-3055

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BOEING	PLANNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.219454

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
ROGER LITTLE

Mailing Address 8500 MORGAN ROAD

City	State	Zip Code
BLUE RIDGE	TX	75424-4542

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SALES	EVP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Transaction ID : SA17.219659

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
EDWARD LONG

Mailing Address 4420 SE 106TH ST

City	State	Zip Code
BELLEVIEW	FL	34420-6835

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SPX FLOW POWER & ENERGY	DIRECTOR, ENGINEERING

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Transaction ID : SA17.218698

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
 _____ 100.00

Subtotal Of Receipts This Page (optional).....▶ _____ 700.00

Total This Period (last page this line number only).....▶ _____

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. SUZANNE S. MAYES

Mailing Address 317 POWDERHORN ROAD

City State Zip Code
FORT WASHINGTON PA 19034-1812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COZEN O'CONNOR ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.220439

Date of Receipt

MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MS. LISA MCBEAN

Mailing Address 38 RUE FONTAINEBLEAU

City State Zip Code
NEWPORT BEACH CA 92660-5905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
675.00

Transaction ID : SA17.219068

Date of Receipt

MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
MRS. LINDA E. MCMAHON

Mailing Address 14 HURLINGHAM DRIVE

City State Zip Code
GREENWICH CT 06831-2739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCMAHON VENTURES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.219969

Date of Receipt

MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....▶ 3300.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
EMIL MONDA

Mailing Address **3 HILLHAVEN RANCH WAY**

City State Zip Code
LAGUNA BEACH CA 92651-6859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.219075

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
SCOTT MOORE

Mailing Address **415 PATTON COVE**

City State Zip Code
BASTROP TX 78602-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CARGILL PRODUCTION SUPERVISOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
259.00

Transaction ID : SA17.218940

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
FRANK MULHALL

Mailing Address **11147 SEA GRASS CIRCLE**

City State Zip Code
BOCA RATON FL 33498-4916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FRANK J MULHALL, PA ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Transaction ID : SA17.218919

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **400.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BILL MURPHY

Mailing Address 2461 NW COUNTY ROAD 4071

City	State	Zip Code
FROST	TX	76641-3480

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
N/A	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218265

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
KURT NELSON

Mailing Address 5520 204TH PL. NE

City	State	Zip Code
REDMOND	WA	98053-4828

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218270

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
KURT NELSON

Mailing Address P.O. BOX 1587

City	State	Zip Code
DENVER	CO	80201-1587

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CHACO ENERGY COMPANY	PETROLEUM ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.224689

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
CROSBY NORBECK

Mailing Address 1515 OAKDALE UNIT 9

City State Zip Code
HOUSTON TX 77004-5986

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIT PETROLEUM COMPANY GEOPHYSICIST

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.219304

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DON W. OLIPHANT

Mailing Address P.O. BOX 1651

City State Zip Code
RANCHO SANTA FE CA 92067-1651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D.W.O. ENTERPRISES REAL ESTATE DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
700.00

Transaction ID : SA17.219953

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID J. OVEN

Mailing Address P.O. BOX 1466

City State Zip Code
ENID OK 73702-1466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
240.00

Transaction ID : SA17.219925

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
180.00

Subtotal Of Receipts This Page (optional).....▶ 480.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ALAN PAGE

Mailing Address 1043 FOUNDERS RIDGE LN

City	State	Zip Code
MCLEAN	VA	22102-2039

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NONE	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219190

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial)
MARTHA PAULISSIAN

Mailing Address 3848 WINFORD DRIVE

City	State	Zip Code
TARZANA	CA	91356-5823

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.217924

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

C. Full Name (Last, First, Middle Initial)
RONALD PETERSON

Mailing Address 30 EAST 51ST ST

City	State	Zip Code
SAVANNAH	GA	31405-2139

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BLUE CROSS BLUE SHIELD	SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219277

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="50.00"/>

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
DAVID RAINES

Mailing Address 611 GRAMMONT STREET

City State Zip Code
MONROE LA 71201-7516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GI CLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.219286

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ELEANOR RATHS

Mailing Address 1144 GRANNY WHITE COURT

City State Zip Code
NASHVILLE TN 37204-4115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MUSIC OF THE BAROQUE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218660

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD RATNER

Mailing Address 1331 MONACO DRIVE

City State Zip Code
PACIFIC PALISADES CA 90272-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CUSHMAN & WAKEFIELD REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.220107

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

Subtotal Of Receipts This Page (optional).....▶ 1550.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. LARRY REGALADO

Mailing Address **90 E. LAS FLORES DRIVE**

City **ALTADENA** State **CA** Zip Code **91001-4854**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LOS ANGELES COUNTY** Occupation **HEALTH INSPECTOR**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.219949

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
ROBERT REYNOLDS

Mailing Address **1104 RIO CIDADE WAY**

City **SACRAMENTO** State **CA** Zip Code **95831-4470**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.219570

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHARLES RIGHTLER

Mailing Address **116 COYATEE POINT DRIVE**

City **LOUDON** State **TN** Zip Code **37774-2883**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17.218551

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **900.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER M. ROWE

Mailing Address 3731 PARK DRIVE

City State Zip Code
CARLSBAD CA 92008-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ECHO PACIFIC CONSTRUCTION VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5200.00

Transaction ID : SA17.220144

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
5200.00

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

B. Full Name (Last, First, Middle Initial)
MRS. ROSE MARIE ROYSTER

Mailing Address 2234 6TH AVENUE

City State Zip Code
SAN DIEGO CA 92101-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONVENTION MANAGER/INDEPENDENT CONTRAC

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
209.00

Transaction ID : SA17.218046

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
9.00

C. Full Name (Last, First, Middle Initial)
BARBARA RUCKER

Mailing Address 922 LAKE DRIVE

City State Zip Code
BEDFORD VA 24523-1314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VIRGINIA COMMONWEALTH UNIVERSITY SIGNAGE COORDINATOR

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218501

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

Subtotal Of Receipts This Page (optional).....▶ 5234.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM L. SCONIERS

Mailing Address 419 E. MAIN STREET APT. 321

City Hendersonville State TN Zip Code 37075-2763

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218438

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. JERI SHAPIRO

Mailing Address 14225 VENTURA BLVD. STE. 100

City Sherman Oaks State CA Zip Code 91423-2758

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.220136

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. ROBERT SHAPIRO

Mailing Address 14225 VENTURA BLVD. STE. 100

City Sherman Oaks State CA Zip Code 91423-2758

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.220137

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. JON W. SLATER

Mailing Address 31413 HIGHLAND AVE

City REDLANDS State CA Zip Code 92374-8232

FEC ID number of contributing federal political committee.

Name of Employer Occupation
OPTIVUS PROTON THERAPY, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219481

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JAMES SMITH

Mailing Address 12750 S. PIPELINE RD

City EULESS State TX Zip Code 76040-5248

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DALWORTH CLEAN OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218233

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. SMITH

Mailing Address 6441 SURFSIDE WAY

City SACRAMENTO State CA Zip Code 95831-1029

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219950

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
LINDA SOMMER

Mailing Address 1640 PINON GLEN

City State Zip Code
COLORADO SPRINGS CO 80919-3344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRIDGE ENERGY CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218271

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES K. SORENSON

Mailing Address 5044 SAN AQUARIO DRIVE

City State Zip Code
SAN DIEGO CA 92109-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218491

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS SHIRLEY SPELLERBERG

Mailing Address 3621 LYNCHBURG DRIVE

City State Zip Code
DENTON TX 76208-5329

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.219208

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 700.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
BOB TAYLOR

Mailing Address **2434 BEACON FOREST DR.**

City **CHARLOTTE** State **NC** Zip Code **28270-2262**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TAYLOR PROPERTIES GROUP, LLC** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17.218434

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. FRED D. THOMPSON JR.

Mailing Address **43786 ABBOTT PLACE**

City **ASHBURN** State **VA** Zip Code **20147-5826**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THOMPSON HOSPITALITY** Occupation **CHIEF ADMINISTRATIVE OFFICER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Transaction ID : SA17.219975

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL TRUEBLOOD

Mailing Address **9 BIENVILLE AVENUE**

City **CAPE GIRARDEAU** State **MO** Zip Code **63701-1944**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED SURGEON**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218514

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
250.00

Subtotal Of Receipts This Page (optional)..... **1775.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. SCOTT R. WAGNER

Mailing Address P.O. BOX 1627

City State Zip Code
YORK PA 17405-1627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17.219903

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
GARY WALDEN

Mailing Address 5909 COUSTEAU CT.

City State Zip Code
ELK GROVE CA 95758-4226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Transaction ID : SA17.219172

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD FONTAINE WARREN

Mailing Address 386 BENT TWIG AVENUE

City State Zip Code
CAMARILLO CA 93012-5144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A.T.T. GOVERNMENT SOLUTIONS ENGINEER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17.219943

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
200.00

Subtotal Of Receipts This Page (optional).....▶ 2225.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
ROBERT WEINER

Mailing Address **2 LEIGHTON CT.**

City State Zip Code
ATLANTA GA 30327-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOTALLY ENTERPRISES, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Transaction ID : SA17.218900

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. KURT C. WHEELER

Mailing Address **25487 ADOBE LANE**

City State Zip Code
LOS ALTOS HILLS CA 94022-4502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLARUS VENTURES VENTURE CAPITALIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.220138

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS E. WHITE

Mailing Address **1899 BEACH BLVD. #206**

City State Zip Code
BILOXI MS 39531-5284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Transaction ID : SA17.220027

Date of Receipt
M M / D D / Y Y Y Y
06 30 2015

CONTRIBUTION

Amount of Each Receipt this Period
2700.00

Subtotal Of Receipts This Page (optional)..... **6400.00**

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MR. THOMAS WICKSTED

Mailing Address 4535 SHENANDOAH ROAD

City	State	Zip Code
ROCKLIN	CA	95765-5231

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED STATE OF CA	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.219932

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DAVID A WILLIAMS

Mailing Address 2001 HALLUM ST

City	State	Zip Code
CLOVIS	NM	88101-8685

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
WILLIAMS INSURANCE LLC	INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218333

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ROBIN WILLIAMS

Mailing Address POB 111

City	State	Zip Code
CROZIER	VA	23039-0111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	WRITER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17.218896

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
MRS. ANN L. WITT

Mailing Address 5132 HUCKLEBERRY CIRCLE

City State Zip Code
HOUSTON TX 77056-2414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Transaction ID : SA17.219974

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JAMES WRIGHT

Mailing Address 6506 PATRICK DRIVE

City State Zip Code
DALLAS TX 75214-2527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Transaction ID : SA17.218474

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT E. YOUNGER

Mailing Address 2236 CENTURY HILL

City State Zip Code
LOS ANGELES CA 90067-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218370

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

Subtotal Of Receipts This Page (optional).....▶ 1200.00

Total This Period (last page this line number only).....▶

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
IRENE ZABARKES

Mailing Address 36 EAST 10TH STREET, APT. 7E

City State Zip Code
NEW YORK NY 10003-6236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218511

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MATTHEW ZERBEL

Mailing Address 1012 LIONS PARK DR

City State Zip Code
ST JOSEPH MI 49085-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LENK TRANSPORTATION INC TRANSPORTATION BROKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17.218584

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BRUCE ZIRINSKY

Mailing Address 13870 WILLISTON WAY

City State Zip Code
NAPLES FL 34119-0919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17.218331

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period
500.00

Subtotal Of Receipts This Page (optional).....▶ 625.00

Total This Period (last page this line number only).....▶

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

A. Full Name (Last, First, Middle Initial)
AQUA AMERICA, INC. H2O PAC

Mailing Address 762 WEST LANCASTER AVENUE

City	State	Zip Code
BRYN MAWR	PA	19010-3402

FEC ID number of contributing federal political committee. **C** C00340455

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17.218981

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....▶ 500.00

Total This Period (last page this line number only).....▶ 500.00

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 517 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CHAD FLORES		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 620 E 20TH STREET		Transaction ID : SB23IK.1004
City HOUSTON	State TX Zip Code 77008	
Purpose of Disbursement IN KIND- POSTAGE	Candidate Name	Amount of Each Disbursement this Period 2700.00
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) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. SARAH ISGUR		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 620 E 20TH STREET		Transaction ID : SB23IK.1006
City HOUSTON	State TX Zip Code 77008	
Purpose of Disbursement IN KIND- POSTAGE	Candidate Name	Amount of Each Disbursement this Period 2700.00
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) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. FRANK SADLER		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 4207 KIMBRELEE COURT		Transaction ID : SB23IK.1001
City ALEXANDRIA	State VA Zip Code 22309	
Purpose of Disbursement IN KIND-POSTAGE	Candidate Name	Amount of Each Disbursement this Period 2700.00
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) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 8100.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 519 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. VALERIE CROSBY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2015
Mailing Address 5907 N. ROCKING RD		Transaction ID : SB23.220837
City SCOTTSDALE	State AZ	
Purpose of Disbursement IN-KIND CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 770.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. MS. VIRGINIA A. SIMPSON		Date of Disbursement MM / DD / YYYY 05 / 13 / 2015
Mailing Address 6022 N. 51ST PLACE		Transaction ID : SB23.220836
City PARADISE VALLEY	State AZ	
Purpose of Disbursement IN-KIND CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 425.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. HF ANTHRACITE LLC		Date of Disbursement MM / DD / YYYY 05 / 13 / 2015
Mailing Address 1707 DUKE STREET		Transaction ID : SB.3
City ALEXANDRIA	State VA	
Purpose of Disbursement PARKING	Candidate Name	Amount of Each Disbursement this Period 855.00
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) ▼	Category/ Type
State: District:		

Subtotal Of Receipts This Page (optional)..... 2050.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)
A. CARDMEMBER SERVICES

Mailing Address PO BOX 15153

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2015

Transaction ID : SB.4

Amount of Each Disbursement this Period: 7146.90

Category/Type

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address 4333 Amon Carter Boulevard MD 5675

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2015

Transaction ID : SB.205

Amount of Each Disbursement this Period: 2271.40

Category/Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. DELTA AIRLINES

Mailing Address 1275 K St NW #1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 18 / 2015

Transaction ID : SB.206

Amount of Each Disbursement this Period: 2208.50

Category/Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 7146.90

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 18 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.204
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1084.20
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. US AIRWAYS		Date of Disbursement MM / DD / YYYY 05 / 18 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.203
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1582.80
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. MLJ CONSULTING INC		Date of Disbursement MM / DD / YYYY 05 / 18 / 2015
Mailing Address PO BOX 371		Transaction ID : SB.5
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 5723.86
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 Receipts This Page (optional)..... 5723.86

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. TUSK DIGITAL		Date of Disbursement MM / DD / YYYY 05 / 18 / 2015
Mailing Address 718 7TH STREET NW, 2ND FLOOR		Transaction ID : SB.6
City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 19600.00	
Purpose of Disbursement DIGITAL CONSULTING/WEB SERVICE	Candidate Name	Category/ Type
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. XCEL HR		Date of Disbursement MM / DD / YYYY 05 / 19 / 2015
Mailing Address 250 EXCHANGE PLACE STE B		Transaction ID : SB.7
City HERNDON State VA Zip Code 20170	Amount of Each Disbursement this Period 40000.00	
Purpose of Disbursement PAYROLL SECURITY DEPOSIT	Candidate Name	Category/ Type
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. HARLAND CLARKE		Date of Disbursement MM / DD / YYYY 05 / 20 / 2015
Mailing Address 15955 LA CANTERA PARKWAY		Transaction ID : SB.8
City SAN ANTONIO State TX Zip Code 78256	Amount of Each Disbursement this Period 144.05	
Purpose of Disbursement PRINTING	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 59744.05

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 523 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. VICTORIA BLANTON		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.16
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 3371.08	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. CASEY ENDERS		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.18
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2127.19	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. ANNA EPSTEIN		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.19
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1500.31	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 6998.58

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. SARAH GRANGER		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.20
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2056.33	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. BRANDON HOWELL		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.21
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1466.40	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. SARAH ISGUR		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.22
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4053.57	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 7576.30

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 525 / 594

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. JESSICA LABERGE		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.23
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1322.61	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. LARISSA MARTINEZ		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.24
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2135.08	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. FRANK SADLER		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.17
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4138.71	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 7596.40

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.10
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1381.03	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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. HILTON		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.214
City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period 1296.93	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.25
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1038.93	
Purpose of Disbursement PAYROLL	Candidate Name	Category/Type
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 Receipts This Page (optional)..... 2419.96

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.26
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20005	Amount of Each Disbursement this Period 510.60
Candidate Name	Category/ Type	
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. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.27
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20005	Amount of Each Disbursement this Period 510.60
Candidate Name	Category/ Type	
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. FAIRFIELD INN		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 10400 Fernwood Road		Transaction ID : SB.35
City BETHESDA	State MD	
Purpose of Disbursement TRAVEL	Zip Code 20817	Amount of Each Disbursement this Period 547.06
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 1568.26

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 530 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. RED ROCKS		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 904 KING STREET		Transaction ID : SB.29
City ALEXANDRIA	State VA Zip Code 22314	
Purpose of Disbursement FOOD/BEVERAGE	Candidate Name	Amount of Each Disbursement this Period 81.40
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.33
City DALLAS	State TX Zip Code 75235	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 412.50
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.36
City DALLAS	State TX Zip Code 75235	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 12.50
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:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 506.40

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.31
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 857.20
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. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.34
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 439.10
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. US AIRWAYS		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.30
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1124.20
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 Receipts This Page (optional)..... 2420.50

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 532 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. VISTAPRINT		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 95 HAYDEN AVE		Transaction ID : SB.28
City LEXINGTON	State MA	
Purpose of Disbursement PRINTING	Candidate Name	Amount of Each Disbursement this Period \$ 125.99
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. VISTAPRINT		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 95 HAYDEN AVE		Transaction ID : SB.32
City LEXINGTON	State MA	
Purpose of Disbursement PRINTING	Candidate Name	Amount of Each Disbursement this Period \$ 24.99
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. COMCAST		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 370 S PICKET ST		Transaction ID : SB.38
City ALEXANDRIA	State VA	
Purpose of Disbursement UTILITIES	Candidate Name	Amount of Each Disbursement this Period \$ 579.10
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 Receipts This Page (optional)..... → \$ 730.08

Total This Period (last page this line number only)..... →

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 533 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. GODADDY.COM		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 14455 N. Hayden Rd., Suite. 226		Transaction ID : SB.37
City SCOTTSDALE	State AZ	
Purpose of Disbursement WEB SERVICE	Candidate Name	Amount of Each Disbursement this Period 683.76
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. LA LIMO		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 223 Gibbons Hwy		Transaction ID : SB.39
City WILTON	State NH	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 131.25
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. AVIS		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 6 Sylvan Way # 1		Transaction ID : SB.42
City Parsippany	State NJ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 282.87
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 Receipts This Page (optional)..... 683.76

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.41
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Amount of Each Disbursement this Period 7298.84
Candidate Name	Category/ Type	
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. HENNINGER MEDIA SERVICES		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 1320 N COURTHOUSE RD #130		Transaction ID : SB.40
City ARLINGTON	State VA	
Zip Code 22201	Purpose of Disbursement WEB SERVICE	Amount of Each Disbursement this Period 1168.65
Candidate Name	Category/ Type	
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. LA LIMO		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 223 Gibbons Hwy		Transaction ID : SB.44
City WILTON	State NH	
Zip Code 03086	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 131.25
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 8598.74

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 535 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. WESTIN		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 1 Star Point		Transaction ID : SB.43
City STAMFORD	State CT	
Zip Code 06902	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 16.09
Candidate Name	Category/ Type	
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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 4333 Amon Carter Boulevard MD 5675		Transaction ID : SB.47
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 40.99
Candidate Name	Category/ Type	
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. CHRIS WALTERS PROFESSIONAL VIDEO SERVICES INC		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 1132 WISEBURG ROAD		Transaction ID : SB.45
City WHITEHALL	State MD	
Zip Code 21161	Purpose of Disbursement EQUIPMENT RENTAL/TRAVEL/PHOTOGRAPHY SVC	Amount of Each Disbursement this Period 1529.40
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 1586.48

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.46
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1680.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 475 L'ENFANT PLZ SW		Transaction ID : SB.48
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 22.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) C. H LAUREN CARNEY		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 30 NORWAY HILL ROAD		Transaction ID : SB.52
City HANCOCK	State NH	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Candidate Name	Amount of Each Disbursement this Period 8000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Category/ Type

Subtotal Of Receipts This Page (optional)..... 9702.87

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. ANNA EPSTEIN		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.50
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1824.11
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: _____	Category/ Type

Full Name (Last, First, Middle Initial) B. CROWNE PLAZA HOTEL		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 3 Ravinia Drive Suite 100		Transaction ID : SB.212
City ATLANTA	State GA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 171.77
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: _____	Category/ Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.209
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 141.60
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: _____	Category/ Type

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 1824.11

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. SARAH GRANGER		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.53
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1677.56	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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. EXPEDIA		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 333 108TH AVE NE		Transaction ID : SB.216
City BELLEVUE State WA Zip Code 98004	Amount of Each Disbursement this Period 149.02	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. PAYLESS CAR RENTAL		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1805 E SKY HARBOR CIR		Transaction ID : SB.218
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period 269.01	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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:		[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 1677.56

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 540 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. PRICELINE		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 800 CONNECTICUT AVENUE		Transaction ID : SB.215
City NORWALK State CT Zip Code 06854	Amount of Each Disbursement this Period 392.60	
Purpose of Disbursement TRAVEL	Candidate Name	[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. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.217
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 255.50	
Purpose of Disbursement TRAVEL	Candidate Name	[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. AMY NOONE FREDERICK		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 15532 YORKTOWN DRIVE		Transaction ID : SB.49
City MONTCLAIRE State VA Zip Code 22015	Amount of Each Disbursement this Period 12500.00	
Purpose of Disbursement FINANCE CONSULTING	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 Receipts This Page (optional)..... 12500.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.59
City ALEXANDRIA	State VA	
Purpose of Disbursement PAYROLL	Candidate Name	Amount of Each Disbursement this Period 965.21
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: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. ISLAND HOTEL		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 690 Newport Center Dr		Transaction ID : SB.219
City NEWPORT BEACH	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 611.58
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: _____	Category/Type	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 4333 Amon Carter Boulevard MD 5675		Transaction ID : SB.55
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 943.80
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: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 1909.01

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CSC CAPITAL LLC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 38 CONDON ROAD		Transaction ID : SB.51
City STILLWATER	State NY	
Zip Code 12170	Purpose of Disbursement FINANCE CONSULTING	Amount of Each Disbursement this Period 15000.00
Candidate Name	Category/Type	
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. INSIGHT COMMUNICATIONS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 2740 S. GLASS STREET		Transaction ID : SB.60
City SIOUX CITY	State IA	
Zip Code 51106	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Amount of Each Disbursement this Period 7500.00
Candidate Name	Category/Type	
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. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.56
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 675.50
Candidate Name	Category/Type	
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 Receipts This Page (optional)..... 23175.50

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 543 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 3301 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

Transaction ID : SB.58

Amount of Each Disbursement this Period

317.95

Full Name (Last, First, Middle Initial)

B. TUSK DIGITAL

Mailing Address 718 7TH STREET NW, 2ND FLOOR

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
DIGITAL CONSULTING/WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

Transaction ID : SB.54

Amount of Each Disbursement this Period

32625.00

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address PO BOX 06649

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

Transaction ID : SB.57

Amount of Each Disbursement this Period

424.10

Subtotal Of Receipts This Page (optional)..... 33367.05

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 544 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. VICTORIA BLANTON		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.65
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 3371.09	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. CASEY ENDERS		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.67
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2127.19	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. ANNA EPSTEIN		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.68
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1500.32	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 6998.60

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 545 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. SARAH GRANGER		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.69
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2056.35	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. BRANDON HOWELL		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.70
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1466.40	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. SARAH ISGUR		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.71
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4053.56	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 7576.31

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 546 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. JESSICA LABERGE		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.72
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1322.62	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. LARISSA MARTINEZ		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.73
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2135.09	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. FRANK SADLER		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.66
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4138.70	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 7596.41

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.74
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1038.95	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. BRIDGET SPURLOCK		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.75
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 921.92	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. AMAZON.COM		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 440 TERRY AVE N		Transaction ID : SB.62
City SEATTLE State WA Zip Code 98109	Amount of Each Disbursement this Period 61.69	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 2022.56

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 200 VESEY STRETT		Transaction ID : SB.76
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Amount of Each Disbursement this Period 9.45
Candidate Name	Category/ Type	
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. HF ANTHRACITE LLC		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 1707 DUKE STREET		Transaction ID : SB.61
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 5300.00
Candidate Name	Category/ Type	
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. XCEL HR		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 250 EXCHANGE PLACE STE B		Transaction ID : SB.63
City HERNDON	State VA	
Zip Code 20170	Purpose of Disbursement RENT	Amount of Each Disbursement this Period 5070.59
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 10380.04

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 549 / 594

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)
A. XCEL HR

Mailing Address 250 EXCHANGE PLACE STE B

City HERNDON State VA Zip Code 20170

Purpose of Disbursement PAYROLL TAXES/INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2015

Transaction ID : SB.64

Amount of Each Disbursement this Period: 10518.11

Category/Type

Full Name (Last, First, Middle Initial)
B. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2015

Transaction ID : SB.78

Amount of Each Disbursement this Period: 39.60

Category/Type

Full Name (Last, First, Middle Initial)
C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 500

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2015

Transaction ID : SB.77

Amount of Each Disbursement this Period: 4339.82

Category/Type

Subtotal Of Receipts This Page (optional)..... 14897.53

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 550 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. HYATT		Date of Disbursement MM / DD / YYYY 06 / 03 / 2015
Mailing Address 9805 Q STREET		Transaction ID : SB.79
City OMAHA	State NE	
Zip Code 68127	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period \$ 239.84
Candidate Name	Category/ Type	
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. HILTON		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.80
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period \$ 1293.16
Candidate Name	Category/ Type	
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. INTUIT		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address 2700 COAST AVE		Transaction ID : SB.83
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement DATABASEMANAGEMENT SERVICE	Amount of Each Disbursement this Period \$ 404.88
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... **\$ 1937.88**

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 551 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.81
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1181.20
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. VIRGIN AMERICA		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address 555 Airport Blvd		Transaction ID : SB.82
City BURLINGAME	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 893.10
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. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 05 / 2015
Mailing Address 200 VESEY STREET		Transaction ID : SB.86
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Candidate Name	Amount of Each Disbursement this Period 2018.92
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 Receipts This Page (optional)..... 4093.22

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. HF ANTHRACITE LLC		Date of Disbursement MM / DD / YYYY 06 / 05 / 2015
Mailing Address 1707 DUKE STREET		Transaction ID : SB.84
City ALEXANDRIA	State VA	
Purpose of Disbursement RENT	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="4255.00"/>
Candidate Name	Category/ Type	
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. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 05 / 2015
Mailing Address 3301 JEFFERSON DAVIS HWY		Transaction ID : SB.87
City ALEXANDRIA	State VA	
Purpose of Disbursement OFFICE SUPPLIES	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="374.76"/>
Candidate Name	Category/ Type	
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. TUSK DIGITAL		Date of Disbursement MM / DD / YYYY 06 / 05 / 2015
Mailing Address 718 7TH STREET NW, 2ND FLOOR		Transaction ID : SB.85
City WASHINGTON	State DC	
Purpose of Disbursement DIGITAL CONSULTING/WEB SERVICE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="20000.00"/>
Candidate Name	Category/ Type	
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 Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address PO BOX 06649

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB.88

Amount of Each Disbursement this Period

426.60

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 440 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2015

Transaction ID : SB.93

Amount of Each Disbursement this Period

73.35

Full Name (Last, First, Middle Initial)

C. CROWNE PLAZA HOTEL

Mailing Address 3 Ravinia Drive Suite 100

City ATLANTA State GA Zip Code 30346

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2015

Transaction ID : SB.91

Amount of Each Disbursement this Period

179.18

Subtotal Of Receipts This Page (optional)..... 679.13

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 13155 NOEL ROAD, SUITE 1600		Transaction ID : SB.95
City DALLAS State TX Zip Code 75240	Amount of Each Disbursement this Period 22.25	
Purpose of Disbursement DELIVERY	Candidate Name	Category/ Type
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. MARRIOTT HOTEL		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 10400 Fernwood Rd		Transaction ID : SB.90
City BETHESDA State MD Zip Code 20817	Amount of Each Disbursement this Period 1575.16	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
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. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.94
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period 237.00	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 1834.41

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 555 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.92
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 699.20
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. VENETIAN		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 3355 S Las Vegas Blvd		Transaction ID : SB.89
City LAS VEGAS	State NV	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 635.04
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. HILTON		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.96
City MCLEAN	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 2.00
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) ▼
State:	District:	

Subtotal Of Receipts This Page (optional)..... 1336.24

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address 475 L'ENFANT PLZ SW		Transaction ID : SB.97
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE	Zip Code 20260	Amount of Each Disbursement this Period 24.78
Candidate Name	Category/ Type	
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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 4333 Amon Carter Boulevard MD 5675		Transaction ID : SB.100
City FORT WORTH	State TX	
Purpose of Disbursement TRAVEL	Zip Code 76155	Amount of Each Disbursement this Period 191.00
Candidate Name	Category/ Type	
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. CMDI		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.98
City TYSONS CORNER	State VA	
Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Zip Code 22182	Amount of Each Disbursement this Period 2544.46
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 2760.24

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 557 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.101
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20005	Amount of Each Disbursement this Period 1582.20
Candidate Name	Category/ Type	
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. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3301 JEFFERSON DAVIS HWY		Transaction ID : SB.99
City ALEXANDRIA	State VA	
Purpose of Disbursement OFFICE SUPPLIES	Zip Code 22305	Amount of Each Disbursement this Period 84.74
Candidate Name	Category/ Type	
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. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.105
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Zip Code 22314	Amount of Each Disbursement this Period 1869.65
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 3536.59

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 558 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 1 AVIATION CIRCLE		Transaction ID : SB.207
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 348.00
Candidate Name	Category/ Type	[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. US AIRWAYS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.208
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 910.40
Candidate Name	Category/ Type	[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. AMTRAK		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 201 I St NE		Transaction ID : SB.102
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 348.00
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 348.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 560 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement MM / DD / YYYY 06 / 12 / 2015
Mailing Address 13156 NOEL ROAD, SUITE 1600		Transaction ID : SB.110
City DALLAS State TX Zip Code 75240	Amount of Each Disbursement this Period \$ 30.44	
Purpose of Disbursement DELIVERY	Category/Type	
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. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 12 / 2015
Mailing Address 3301 JEFFERSON DAVIS HWY		Transaction ID : SB.107
City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period \$ 156.87	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
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. US AIRWAYS		Date of Disbursement MM / DD / YYYY 06 / 12 / 2015
Mailing Address 4000 E. Sky Harbor Blvd		Transaction ID : SB.108
City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period \$ 600.20	
Purpose of Disbursement TRAVEL	Category/Type	
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 Receipts This Page (optional)..... **787.51**

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. BEDFORD VILLAGE INN		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 2 Olde Bedford Way		Transaction ID : SB.113
City BEDFORD	State NH	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 871.53
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. HILTON		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.111
City MCLEAN	State VA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 790.00
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) ▼
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 3 Ravinia Dr NE #100		Transaction ID : SB.112
City ATLANTA	State GA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 156.96
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 Receipts This Page (optional)..... 1818.49

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. MARRIOTT HOTEL		Date of Disbursement MM / DD / YYYY 06 / 16 / 2015
Mailing Address 10400 Fernwood Rd		Transaction ID : SB.114
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 213.83
Candidate Name	Category/ Type	
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. AMTRAK		Date of Disbursement MM / DD / YYYY 06 / 17 / 2015
Mailing Address 201 I St NE		Transaction ID : SB.117
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 101.00
Candidate Name	Category/ Type	
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. CMDI		Date of Disbursement MM / DD / YYYY 06 / 17 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.115
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Amount of Each Disbursement this Period 5738.20
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 6053.03

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 17 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.119
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 981.10
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:	Category/ Type

Full Name (Last, First, Middle Initial) B. VICTORIA BLANTON		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.127
City ALEXANDRIA	State VA	
Purpose of Disbursement PAYROLL	Candidate Name	Amount of Each Disbursement this Period 3371.08
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:	Category/ Type

Full Name (Last, First, Middle Initial) C. CASEY ENDERS		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.129
City ALEXANDRIA	State VA	
Purpose of Disbursement PAYROLL	Candidate Name	Amount of Each Disbursement this Period 2127.19
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:	Category/ Type

Subtotal Of Receipts This Page (optional)..... 6479.37

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 565 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. ANNA EPSTEIN		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.130
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1500.31	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. JUSTIN GIORGIO		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.138
City ALEXANDRIA State VA Zip Code 02314	Amount of Each Disbursement this Period 911.17	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. SARAH GRANGER		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.131
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2056.33	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 4467.81

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. BRANDON HOWELL		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.132
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1466.40	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. SARAH ISGUR		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.133
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4053.56	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. JESSICA LABERGE		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.134
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1322.62	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 6842.58

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. LARISSA MARTINEZ		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.135
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2135.08	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. FRANK SADLER		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.128
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 4138.70	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. REBECCA SCHIEBER		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.136
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1038.93	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 7312.71

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. BRIDGET SPURLOCK		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.137
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 921.92	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
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. ADOBE		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 345 Park Avenue		Transaction ID : SB.124
City SAN JOSE State CA Zip Code 95110	Amount of Each Disbursement this Period 14.99	
Purpose of Disbursement SOFTWARE	Candidate Name	Category/ Type
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. CS STRATEGIES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 6626 CYPRESS POINT ROAD		Transaction ID : SB.121
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 4436.91

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. NHL.COM		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 601 F ST NW		Transaction ID : SB.126
City WASHINGTON	State DC	
Purpose of Disbursement OFFICE SUPPLIES	Zip Code 20004	Amount of Each Disbursement this Period 185.94
Candidate Name	Category/ Type	
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. OVERSTOCK.COM		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 231 E 1600 S S		Transaction ID : SB.123
City PROVO	State UT	
Purpose of Disbursement OFFICE SUPPLIES	Zip Code 84606	Amount of Each Disbursement this Period 353.81
Candidate Name	Category/ Type	
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. SJ ROLLINS TECHNOLOGIES INC		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 242 STATE STREET		Transaction ID : SB.122
City BANGOR	State ME	
Purpose of Disbursement EQUIPMENT INSTALLATION	Zip Code 04401	Amount of Each Disbursement this Period 85.00
Candidate Name	Category/ Type	
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 Receipts This Page (optional).....	624.75
Total This Period (last page this line number only).....	

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 570 / 594

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.125
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1159.20
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. XCEL HR		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 250 EXCHANGE PLACE STE B		Transaction ID : SB.139
City HERNDON	State VA	
Purpose of Disbursement PAYROLL TAXES/INSURANCE	Candidate Name	Amount of Each Disbursement this Period 10760.82
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. XCEL HR		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 250 EXCHANGE PLACE STE B		Transaction ID : SB.140
City HERNDON	State VA	
Purpose of Disbursement RENT	Candidate Name	Amount of Each Disbursement this Period 5243.11
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 Receipts This Page (optional)..... 17163.13

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. JESSICA LABERGE		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 1020 N FAIRFAX ST STE 200		Transaction ID : SB.144
City ALEXANDRIA	State VA	
Purpose of Disbursement OFFICE SUPPLIES/DELIVERY	Candidate Name	Amount of Each Disbursement this Period 72.04
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. AMTRAK		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 201 I St NE		Transaction ID : SB.146
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 81.00
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) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. COMCAST		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 370 S PICKET ST		Transaction ID : SB.141
City ALEXANDRIA	State VA	
Purpose of Disbursement UTILITIES	Candidate Name	Amount of Each Disbursement this Period 1453.49
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 Receipts This Page (optional)..... 1606.53

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CONSERVATIVE CONNECTOR		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 435 E MAIN ST		Transaction ID : SB.152
City GREENWOOD State IN Zip Code 46143	Amount of Each Disbursement this Period 41555.84	
Purpose of Disbursement FINANCE CONSULTING/CREDIT CARD MERCHANT FEES	Candidate Name	Category/ Type
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. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.145
City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 511.20	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
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. H/F ANTHRACITE, LLC		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 1707 DUKE STREET		Transaction ID : SB.142
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 170.86	
Purpose of Disbursement UTILITIES	Candidate Name	Category/ Type
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 Receipts This Page (optional)..... 42237.90

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. PMI		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 300 MASSACHUSETTS AVE		Transaction ID : SB.149
City WASHINGTON	State DC	
Purpose of Disbursement PARKING	Candidate Name	Amount of Each Disbursement this Period 6.00
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) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.147
City DALLAS	State TX	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 6.00
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) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 3301 JEFFERSON DAVIS HWY		Transaction ID : SB.150
City ALEXANDRIA	State VA	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 233.25
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:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... 245.25

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. TC PRINTING		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 1215 G STREET		Transaction ID : SB.143
City SACRAMENTO	State CA	
Purpose of Disbursement PRINTING	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2190.81"/>
Candidate Name	Category/ Type	
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. USPS		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015
Mailing Address 475 L'ENFANT PLZ SW		Transaction ID : SB.151
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="5.75"/>
Candidate Name	Category/ Type	
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. TC PRINTING		Date of Disbursement MM / DD / YYYY 06 / 20 / 2015
Mailing Address 1215 G STREET		Transaction ID : SB.153
City SACRAMENTO	State CA	
Purpose of Disbursement PRINTING	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3461.37"/>
Candidate Name	Category/ Type	
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 Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 575 / 594

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. THE PENINSULA GOLF & COUNTRY CLUB		Date of Disbursement MM / DD / YYYY 06 / 20 / 2015
Mailing Address 701 MADERA DRIVE		Transaction ID : SB.154
City SAN MATEO State CA Zip Code 94403	Amount of Each Disbursement this Period 2250.51	
Purpose of Disbursement TRAVEL	Candidate Name	Category/Type
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. AMAZON.COM		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 440 TERRY AVE N		Transaction ID : SB.163
City SEATTLE State WA Zip Code 98109	Amount of Each Disbursement this Period 24.99	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Category/Type
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. BB&T BANK		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 2200 WILSON BLVD STE 100		Transaction ID : SB.159
City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 436.23	
Purpose of Disbursement BANK FEE	Candidate Name	Category/Type
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 Receipts This Page (optional)..... 2711.73

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.155
City TYSONS CORNER	State VA	
Purpose of Disbursement DATABASE MANAGEMENT SERVICE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="16136.73"/>
Candidate Name	Category/ Type	
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. HILTON		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.161
City MCLEAN	State VA	
Purpose of Disbursement TRAVEL	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="6073.77"/>
Candidate Name	Category/ Type	
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. HYATT		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 9805 Q STREET		Transaction ID : SB.164
City OMAHA	State NE	
Purpose of Disbursement TRAVEL	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="737.48"/>
Candidate Name	Category/ Type	
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 Receipts This Page (optional).....

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : SB.162

Amount of Each Disbursement this Period

3	9	.	9	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. MACHADO & CO

Mailing Address 6111 NEWMAN ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : SB.156

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. OMNI HOTELS

Mailing Address 4001 Maple Avenue

City DALLAS State TX Zip Code 75219

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : SB.160

Amount of Each Disbursement this Period

4	9	8	3	.	1	4
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Subtotal Of Receipts This Page (optional).....

1	5	0	2	3	.	0	9
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Total This Period (last page this line number only).....

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**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. FRONTIER AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 7001 Tower Road		Transaction ID : SB.166
City DENVER	State CO	
Zip Code 80249	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 418.00
Candidate Name	Category/ Type	
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. ISLAND HOTEL		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 690 Newport Center Dr		Transaction ID : SB.167
City NEWPORT BEACH	State CA	
Zip Code 92660	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 903.57
Candidate Name	Category/ Type	
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. ACME MAIL SERVICE		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 305 CALYPSO ROAD		Transaction ID : SB.168
City GILBERT	State SC	
Zip Code 29054	Purpose of Disbursement LIST RENTAL	Amount of Each Disbursement this Period 925.00
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 2246.57

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.172
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Category/Type	Amount of Each Disbursement this Period 4273.57
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. KRAMER & ASSOCIATES LLC		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 2201 FRANCISCO DRIVE, SUITE 140-18		Transaction ID : SB.169
City EL DORADO HILLS	State CA Zip Code 95762	
Purpose of Disbursement FINANCE CONSULTING	Category/Type	Amount of Each Disbursement this Period 24370.64
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. ORBITZ		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 500 W MADISON STE 1000		Transaction ID : SB.177
City CHICAGO	State IL Zip Code 60661	
Purpose of Disbursement TRAVEL	Category/Type	Amount of Each Disbursement this Period 6.99
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 Receipts This Page (optional)..... 28651.20

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 2702 Love Field Dr		Transaction ID : SB.175
City DALLAS State TX Zip Code 75235	Amount of Each Disbursement this Period \$ 549.00	
Purpose of Disbursement TRAVEL	Category/Type	
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. TC PRINTING		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 1215 G STREET		Transaction ID : SB.170
City SACRAMENTO State CA Zip Code 95814	Amount of Each Disbursement this Period \$ 3251.14	
Purpose of Disbursement PRINTING	Category/Type	
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. TUSK DIGITAL		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 718 7TH STREET NW, 2ND FLOOR		Transaction ID : SB.171
City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period \$ 20000.00	
Purpose of Disbursement DIGITAL CONSULTING/WEB SERVICE	Category/Type	
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 Receipts This Page (optional)..... → \$ 23800.14

Total This Period (last page this line number only)..... →

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address PO BOX 06649		Transaction ID : SB.173
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 2470.40
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: _____	Category/Type	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 475 L'ENFANT PLZ SW		Transaction ID : SB.176
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 246.85
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: _____	Category/Type	

Full Name (Last, First, Middle Initial) C. VISTAPRINT		Date of Disbursement MM / DD / YYYY 06 / 24 / 2015
Mailing Address 95 HAYDEN AVE		Transaction ID : SB.174
City LEXINGTON	State MA	
Purpose of Disbursement PRINTING	Candidate Name	Amount of Each Disbursement this Period 30.98
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: _____	Category/Type	

Subtotal Of Receipts This Page (optional)..... 2748.23

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. CHRISTY BRITTON SENEY		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1020 N FAIRFAX ST		Transaction ID : SB.182
City ALEXANDRIA	State VA	
Purpose of Disbursement OFFICE SUPPLIES/DELIVERY		Amount of Each Disbursement this Period 2008.99
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. MINUTEMAN PRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1529 DUKE STREET		Transaction ID : SB.228
City ALEXANDRIA	State VA	
Purpose of Disbursement PRINTING		Amount of Each Disbursement this Period 1666.35
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:	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 3301 JEFFERSON DAVIS HWY		Transaction ID : SB.227
City ALEXANDRIA	State VA	
Purpose of Disbursement PENS/PAPER/INK		Amount of Each Disbursement this Period 145.64
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:	

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2008.99

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 475 L'ENFANT PLZ SW		Transaction ID : SB.229
City WASHINGTON	State DC	
Purpose of Disbursement POSTAGE	Zip Code 20260	Amount of Each Disbursement this Period 147.00
Candidate Name	Category/ Type	[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. AMY NOONE FREDERICK		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1020 N FAIRFAX ST		Transaction ID : SB.181
City ALEXANDRIA	State VA	
Purpose of Disbursement TRAVEL	Zip Code 22314	Amount of Each Disbursement this Period 4108.48
Candidate Name	Category/ Type	[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. AMTRAK		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 201 I St NE		Transaction ID : SB.224
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20002	Amount of Each Disbursement this Period 559.00
Candidate Name	Category/ Type	[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 Receipts This Page (optional)..... 4108.48

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.220
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20005	Amount of Each Disbursement this Period 1222.40
Candidate Name	Category/ Type	[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. DOUBLETREE		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 4727 CONCORD PIKE		Transaction ID : SB.223
City WILMINGTON	State DE	
Purpose of Disbursement TRAVEL	Zip Code 19803	Amount of Each Disbursement this Period 225.72
Candidate Name	Category/ Type	[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. HILTON		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Transaction ID : SB.226
City MCLEAN	State VA	
Purpose of Disbursement TRAVEL	Zip Code 22102	Amount of Each Disbursement this Period 1079.53
Candidate Name	Category/ Type	[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 Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 10400 Fernwood Rd		Transaction ID : SB.222
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 161.24
Candidate Name	Category/Type	[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. RADISSON		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 111 N GRAND AVE		Transaction ID : SB.225
City LANSING	State MI	
Zip Code 48933	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 237.30
Candidate Name	Category/Type	[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. RENAISSANCE HOTEL		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 10 N BROADWAY		Transaction ID : SB.221
City OKLAHOMA CITY	State OK	
Zip Code 73102	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 181.07
Candidate Name	Category/Type	[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 Receipts This Page (optional)..... 0.00

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 440 TERRY AVE N		Transaction ID : SB.189
City SEATTLE	State WA	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 312.63
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1593 SPRING HILL ROAD, SUITE 500		Transaction ID : SB.183
City TYSONS CORNER	State VA	
Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Candidate Name	Amount of Each Disbursement this Period 1218.00
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) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. CONSERVATIVE CONNECTOR		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 435 E MAIN ST		Transaction ID : SB.190
City GREENWOOD	State IN	
Purpose of Disbursement FINANCE CONSULTING/CREDIT CARD MERCHANT FEES	Candidate Name	Amount of Each Disbursement this Period 21018.43
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:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 22549.06

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. EVENTBRITE		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 155 5TH ST, 7TH FLOOR		Transaction ID : SB.192
City SAN FRANCISCO	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type	Amount of Each Disbursement this Period 709.48
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. HYATT		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 9805 Q STREET		Transaction ID : SB.184
City OMAHA	State NE	
Purpose of Disbursement TRAVEL	Category/ Type	Amount of Each Disbursement this Period 769.37
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. RAND MCNALLY		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address PO BOX 7600		Transaction ID : SB.187
City CHICAGO	State IL	
Purpose of Disbursement TRAVEL	Category/ Type	Amount of Each Disbursement this Period 45.05
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 Receipts This Page (optional)..... 1523.90

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 590 / 594

23 24 25 26 27a
 27b 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)

CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 Love Field Dr

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2015

Transaction ID : SB.186

Amount of Each Disbursement this Period

1000.00 256.00

Full Name (Last, First, Middle Initial)

B. TJ STONES

Mailing Address 608 MONTGOMERY ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2015

Transaction ID : SB.191

Amount of Each Disbursement this Period

1000.00 101.99

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E. Sky Harbor Blvd

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2015

Transaction ID : SB.188

Amount of Each Disbursement this Period

1000.00 645.20

Subtotal Of Receipts This Page (optional)..... 1003.19

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. US FLAG STORE		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 1420 Kansas Ave.		Transaction ID : SB.185
City KANSAS CITY	State MO	
Zip Code 64127	Purpose of Disbursement OFFICE SUPPLIES	Amount of Each Disbursement this Period 647.70
Candidate Name	Category/ Type	
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. COMPLETE CAMPAIGNS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 3625 RUFFIN ROAD, SUITE 100		Transaction ID : SB.193
City SAN DIEGO	State CA	
Zip Code 92123	Purpose of Disbursement FINANCE CONSULTING/CREDIT CARD MERCHANT FEES	Amount of Each Disbursement this Period 43543.95
Candidate Name	Category/ Type	
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. HYATT		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 9805 Q STREET		Transaction ID : SB.195
City OMAHA	State NE	
Zip Code 68127	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 193.93
Candidate Name	Category/ Type	
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 Receipts This Page (optional).....	44385.58
Total This Period (last page this line number only).....	

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 3301 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : SB.194

Amount of Each Disbursement this Period

2	8	8	.	9	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E. Sky Harbor Blvd

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : SB.196

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. BB&T BANK

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Transaction ID : SB.202

Amount of Each Disbursement this Period

2	5	.	0	0
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Subtotal Of Receipts This Page (optional)..... 338.95

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 1275 K St NW #1200		Transaction ID : SB.200
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20005	Amount of Each Disbursement this Period 978.00
Candidate Name	Category/ Type	
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. HYATT		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 9805 Q STREET		Transaction ID : SB.199
City OMAHA	State NE	
Purpose of Disbursement TRAVEL	Zip Code 68127	Amount of Each Disbursement this Period 900.02
Candidate Name	Category/ Type	
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID : SB.199
City	State	
Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 978.02

Total This Period (last page this line number only)..... 708253.79

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 594 / 594

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CARLY FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. DERK EPPINK		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 500 EAST 77 STREET		Transaction ID : SB.201
City NEW YORK CITY	State NY	
Zip Code 10162	Purpose of Disbursement CONTRIBUTION REFUND	Amount of Each Disbursement this Period 125.00
Candidate Name	Category/ Type	
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. ROBERT LEROY MERCER		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 600 ROUTE 25A		Transaction ID : SB.198
City EAST SETAUKET	State NY	
Zip Code 11733	Purpose of Disbursement CONTRIBUTION REFUND	Amount of Each Disbursement this Period 5400.00
Candidate Name	Category/ Type	
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. JOEL G PETERSON		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 2755 EAST COTTONWOOD PARKWAY #40		Transaction ID : SB.197
City SALT LAKE CITY	State UT	
Zip Code 84121	Purpose of Disbursement CONTRIBUTION REFUND	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	
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 Receipts This Page (optional)..... 5575.00

Total This Period (last page this line number only)..... 5575.00