

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

MAKE AMERICA AWESOME

ADDRESS (number and street) PO BOX 26141

Check if different than previously reported. (ACC) ALEXANDRIA VA 22313

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

C C00594176

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on [MM] / [DD] / [YYYY] in the State of []

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

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 02 / 01 / 2016 through [MM] / [DD] / [YYYY] 02 / 29 / 2016

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 Chris Marston

Signature of Treasurer Chris Marston [Electronically Filed] Date 03 / 20 / 2016

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MAKE AMERICA AWESOME

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="1711.77"/>	<input type="text" value="1711.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10052.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10337.00"/>	<input type="text" value="18977.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20389.00"/>	<input type="text" value="20688.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5577.35"/>	<input type="text" value="5877.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14811.65"/>	<input type="text" value="14811.65"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="12490.74"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MAKE AMERICA AWESOME

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4250.00	6000.00
(ii) Unitemized	6087.00	12977.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10337.00	18977.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10337.00	18977.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	10337.00	18977.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10337.00	18977.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	855.75	1155.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	855.75	1155.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	4721.60	4721.60
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5577.35	5877.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5577.35	5877.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10337.00	18977.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10337.00	18977.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	855.75	1155.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	855.75	1155.52

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

The 24-Hour Independent Expenditure Report filed on Feb. 3, included three estimated expenditures. The expenditures were to purchase advertising that never ran. The estimated expenditures for WMTK \$192, Q106 \$330, and WZEI \$156 reported on that 24-Hour report are not included on this report.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

A. Bruce Barket
Full Name (Last, First, Middle Initial)
Mailing Address 666 Old Country Rd
City Garden City State NY Zip Code 11530
FEC ID number of contributing federal political committee. **C**
Name of Employer Barket, Marion, Epstein & Kear Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 02 / 15 / 2016
Transaction ID : SA11AI.4563
Amount of Each Receipt this Period 500.00
 Memo Item

B. Donald Gayhardt
Full Name (Last, First, Middle Initial)
Mailing Address 511 Lynmere Rd
City Bryn Mawr State PA Zip Code 19010
FEC ID number of contributing federal political committee. **C**
Name of Employer Speedy Group Holdings Corp Occupation Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 02 / 15 / 2016
Transaction ID : SA11AI.4561
Amount of Each Receipt this Period 1000.00
 Memo Item

C. H Justin Pace
Full Name (Last, First, Middle Initial)
Mailing Address 3440 Oakdale St
City Houston State TX Zip Code 77004
FEC ID number of contributing federal political committee. **C**
Name of Employer McKool Smith Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 25 / 2016
Transaction ID : SA11AI.4569
Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

A. Virginia Postrel
Full Name (Last, First, Middle Initial)
Mailing Address 1830 Kelton Ave #2
City Los Angeles State CA Zip Code 90025
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Writer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 23 / 2016
Transaction ID : SA11AI.4565
Amount of Each Receipt this Period 250.00
 Memo Item

B. Donald Sherwood
Full Name (Last, First, Middle Initial)
Mailing Address 41 Sherwood Dr
City Tunkhanook State PA Zip Code 18657
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Auotmobile Dealer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 02 / 01 / 2016
Transaction ID : SA11AI.4110
Amount of Each Receipt this Period 1000.00
 Memo Item

C. Lee Tabin
Full Name (Last, First, Middle Initial)
Mailing Address 2660 Roslyn Ln
City Highland Park State IL Zip Code 60035
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 01 / 2016
Transaction ID : SA11AI.4112
Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

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

Mailing Address 660 9th St SW

City Washington State DC Zip Code 20024

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

Name of Employer Government Employee Occupation Federal Government

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11AI.4571

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO Box 10001
PMB 777

City Saipan State MP Zip Code 96950

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

Name of Employer CNMI Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2016

Transaction ID : SA11AI.4567

Amount of Each Receipt this Period
500.00

Memo Item

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	4250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

Full Name (Last, First, Middle Initial)

A. Liz Mair

Mailing Address 1200 Nash St
Ste 247

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Repayment of Personal Funds Advance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2016

Transaction ID : SB21B.4489

Amount of Each Disbursement this Period

433.80

Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Advertising - Online

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SB21B.4489.4

Amount of Each Disbursement this Period

158.68

Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Advertising - Online

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : SB21B.4489.6

Amount of Each Disbursement this Period

48.74

Memo Item

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

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

433.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

Full Name (Last, First, Middle Initial)

A. Liz Mair

Mailing Address 1200 Nash St
Ste 247

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Repayment of Personal Funds Advance for IEs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2016

Transaction ID : SB21B.4502

Amount of Each Disbursement this Period

4721.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Liz Mair

Mailing Address 1200 Nash St
Ste 247

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Negative Entry to Move Itemization of Repayment to Sch. E

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2016

Transaction ID : SB21B.4503

Amount of Each Disbursement this Period

-4721.60

Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2211 N First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4559

Amount of Each Disbursement this Period

301.95

Memo Item

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

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

301.95

735.75

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advance of Personal Funds (See December IE Memo Entry)
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 4721.60	Transaction ID : SD10.4479	
Amount Incurred This Period 0.00	Payment This Period 4721.60	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advance of Personal Funds
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 433.80	Transaction ID : SD10.4116	
Amount Incurred This Period 0.00	Payment This Period 433.80	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advance for Independent Expenditures (NH) (See Memo Entries on Sch. E)
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4538	
Amount Incurred This Period 6258.55	Payment This Period 0.00	Outstanding Balance at Close of This Period 6258.55

1) SUBTOTALS This Period This Page (optional)..... ▶	6258.55
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MAKE AMERICA AWESOME

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advances for Non-IE Expenditures
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4537	
Amount Incurred This Period 26.31	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advance for Independent Expenditures (NV) (See Memo Entries on Sch. E)
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4556	
Amount Incurred This Period 5256.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 5256.53

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Liz Mair	Nature of Debt (Purpose): Advance for Independent Expenditures (VA) (See Memo Entries on Sch. E)
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4557	
Amount Incurred This Period 949.35	Payment This Period 0.00	Outstanding Balance at Close of This Period 949.35

1) SUBTOTALS This Period This Page (optional)..... ▶	6232.19
2) TOTALS This Period (last page this line number only)..... ▶	12490.74
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	12490.74

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME	FEC IDENTIFICATION NUMBER ▼ C C00594176
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Alpha Media (Digity 3E) <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 01 / 25 / 2016
Mailing Address 341 S Yorktown Pike	Amount <input type="text"/> 864.00
City State Zip Code Mason City IA 50401	Transaction ID : SE.4505 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 02 / 20 / 2016
Purpose of Expenditure Advertising - Radio (Memo on Feb 20 Report; Reimburse Mair) Category/Type <input type="text"/>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 864.00	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Beasley Broadcast Group, Inc. <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 02 / 17 / 2016
Mailing Address 3033 Riviera Dr Ste 200	Amount <input type="text"/> 2295.00
City State Zip Code Naples FL 34103	Transaction ID : SE.4549 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Advertising - Radio (Estimated as BBG \$650, BBG \$2050 on 24-Hour) Category/Type <input type="text"/>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/> 864.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date / /
03 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME
FEC IDENTIFICATION NUMBER C C00594176
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Binnie Media/Carlisle One Media, Inc
Mailing Address 126 Daniel St Ste 200
City Portsmouth State NH Zip Code 03801
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 1200.00
Transaction ID : SE.4522
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

Full Name of Payee CBS Radio
Mailing Address 1271 Avenue of the Americas Fl 44
City New York State NY Zip Code 10020
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 17 / 2016
Amount 1200.00
Transaction ID : SE.4545
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Chris Marston [Electronically Filed] Date 03 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00594176 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Charlottesville Radio Group <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016	
Mailing Address 1140 Rose Hill Dr		Amount 191.00	
City Charlottesville	State VA	Zip Code 22903	Transaction ID : SE.4542
Purpose of Expenditure Advertising - Radio	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
0.00			

Full Name of Payee Facebook <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2016	
Mailing Address 1 Hacker Way		Amount 500.00	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.4544
Purpose of Expenditure Advertising - Digital	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
0.00			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

Signature _____ [Electronically Filed] Date **03 / 20 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME	FEC IDENTIFICATION NUMBER ▼ C C00594176
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Facebook <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 26 / 2016
Mailing Address 1 Hacker Way	Amount 99.60
City State Zip Code Menlo Park CA 94025	Transaction ID : SE.4551 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Advertising - Digital	Category/Type
Name of Federal Candidate DONALD J TRUMP	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
0.00	

Full Name of Payee Facebook <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 16 / 2016
Mailing Address 1 Hacker Way	Amount 250.03
City State Zip Code Menlo Park CA 94025	Transaction ID : SE.4555 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Advertising - Digital	Category/Type
Name of Federal Candidate DONALD J TRUMP	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
0.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
03 / 20 / 2016

Signature _____

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4555

This Independent Expenditure was unintentionally omitted from the 24-Hour Independent Expenditure report filed on Feb. 17.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME
FEC IDENTIFICATION NUMBER C C00594176
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Great Eastern Radio
Mailing Address 106 N Main St
City West Lebanon State NH Zip Code 03784
Purpose of Expenditure Advertising - Radio (Reported as WEEY \$120 on 24-Hour)
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 120.00
Transaction ID : SE.4528
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

Full Name of Payee Great Eastern Radio
Mailing Address 106 N Main St
City West Lebanon State NH Zip Code 03784
Purpose of Expenditure Advertising - Radio (Reported as WLKZ \$180 on 24-Hour)
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 180.00
Transaction ID : SE.4530
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Chris Marston [Electronically Filed] Date 03 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME	FEC IDENTIFICATION NUMBER ▼ C C00594176
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee KBUR (Galesburg Broadcasting) <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 25 / 2016
Mailing Address 610 4th St Ste 300	Amount 227.96
City State Zip Code Burlington IA 52601	
Purpose of Expenditure Advertising - Radio (Memo on Feb. 20 Report; Reimburse Mair)	Category/Type
Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1091.96	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4506

Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
02 / 20 / 2016

Full Name of Payee KCPS <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 25 / 2016
Mailing Address 205 S Gear Ave	Amount 157.80
City State Zip Code West Burlington IA 52655	
Purpose of Expenditure Advertising - Radio (Memo on Feb 20 Report; Reimburse Mair)	Category/Type
Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1249.76	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4507

Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
02 / 20 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	385.76
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
03 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME		FEC IDENTIFICATION NUMBER C C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee KICD (Spencer Radio Group) <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 25 / 2016
Mailing Address PO Box 260		Amount 698.34
City Spencer	State IA	Zip Code 51301
Purpose of Expenditure Advertising - Radio	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2016
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	1948.10	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee KMA (KMA Broadcasting) <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 25 / 2016
Mailing Address 209 N Elm St		Amount 1260.00
City Shenandoah	State IA	Zip Code 51601
Purpose of Expenditure Advertising - Radio (Memo on Feb 20 Report; Reimburse Mair)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2016
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	3208.10	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1958.34
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston
Signature

[Electronically Filed]

Date **03 / 20 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME		FEC IDENTIFICATION NUMBER C C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Koor Communications <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 02 / 2016
Mailing Address PO Box 2295		Amount 315.00
City New London	State NH	Zip Code 03257
Purpose of Expenditure Advertising - Radio (WNTK \$195; WUVR \$120 on 24-Hr Report; Reimburse Mair)		Transaction ID : SE.4514
Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2016
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 997.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Monticello Media LLC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 26 / 2016
Mailing Address 1150 Pepsi Place Ste 300		Amount 658.75
City Charlottesville	State VA	Zip Code 22901
Purpose of Expenditure Advertising - Radio		Transaction ID : SE.4540
Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Date of Disbursement or Obligation MM / DD / YYYY
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	315.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston
Signature

[Electronically Filed]

Date MM / DD / YYYY
03 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME	FEC IDENTIFICATION NUMBER ▼ C C00594176
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee NCC Media <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 02 / 05 / 2016
Mailing Address 7501 Wisconsin Ave	Amount <input type="text"/> 2443.75
City State Zip Code Bethesda MD 20814	Transaction ID : SE.4517 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Advertising - TV	Category/Type <input type="text"/>
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee NCC Media <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 02 / 18 / 2016
Mailing Address 7501 Wisconsin Ave	Amount <input type="text"/> 1011.50
City State Zip Code Bethesda MD 20814	Transaction ID : SE.4550 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Advertising - TV (Reported as \$1190 on 24-Hour)	Category/Type <input type="text"/>
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date / /
03 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME		FEC IDENTIFICATION NUMBER C C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Northeast Communications <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 02 / 2016
Mailing Address 300 Main St		Amount 150.00
City Plymouth	State NH	Zip Code 03264
Purpose of Expenditure Advertising - Radio (Reported as WPNH \$150 on 24-Hour)		Transaction ID : SE.4531
Name of Federal Candidate DONALD J TRUMP		Date of Disbursement or Obligation MM / DD / YYYY
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
		0.00

Full Name of Payee Radio New England <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 02 / 2016
Mailing Address 15 Main St		Amount 394.80
City Littleton	State NH	Zip Code 03561
Purpose of Expenditure Advertising - Radio (Reported as WOTX/WOXX \$202.80, WLTN \$192 on 24-Hour Report)		Transaction ID : SE.4523
Name of Federal Candidate DONALD J TRUMP		Date of Disbursement or Obligation MM / DD / YYYY
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
		0.00

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

Signature _____ [Electronically Filed] Date MM / DD / YYYY
03 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME
FEC IDENTIFICATION NUMBER C C00594176
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Townsquare Media
Mailing Address 240 Greenwich Ave
City Greenwich State CT Zip Code 06830
Purpose of Expenditure Advertising - Radio (Reported as WHOM \$600 on 24-Hour Report, also reported twice)
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 600.00
Transaction ID : SE.4525
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

Full Name of Payee Townsquare Media
Mailing Address 240 Greenwich Ave
City Greenwich State CT Zip Code 06830
Purpose of Expenditure Advertising - Radio (Reported as WOKQ \$1170 on 24-Hour Report)
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00
Date of Public Distribution/Dissemination 02 / 02 / 2016
Amount 1170.00
Transaction ID : SE.4527
Date of Disbursement or Obligation
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Chris Marston [Electronically Filed] Date 03 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME	FEC IDENTIFICATION NUMBER ▼ C C00594176
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee WASR <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 02 / 2016
Mailing Address PO Box 900	Amount 178.50
City State Zip Code Wolfeboro NH 03894	Transaction ID : SE.4512 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 20 / 2016
Purpose of Expenditure Advertising - Radio (Est \$125 on 24-Hr Report; Reimburse Mair)	Category/Type
Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 682.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

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

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	178.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	4721.60

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
03 / 20 / 2016