

**FEC  
FORM 3X**

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

RECEIVED  
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2018 OCT 29 AM 9:09

Office Use Only

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

AFOGNAK NATIVE CORPORATION - ALUTHIQ PAC

ADDRESS (number and street) 3909 ARCTIC BLVD.

Check if different than previously reported. (ACC)

SUITE 500

ANCHORAGE AK 99503

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

C 00443937

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on M M / D D / Y Y Y Y in the State of

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

General (30G)	Runoff (30R)	Special (30S)
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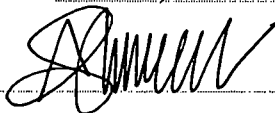
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 01 2015 through 03 31 2015

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

Type or Print Name of Treasurer AMY J. SHIMEK

Signature of Treasurer



Date 10 25 2018

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

**FEC FORM 3X**  
Rev. 12/2004



**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**AFOGNAK NATIVE CORPORATION - ALUTHQ PAC**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 01 01 2015 To: <sup>M M / D D / Y Y Y Y</sup> 03 31 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	520.00 ,	520.00 ,
(ii) Unitemized.....	0 ,	0 ,
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	520.00 ,	520.00 ,
(b) Political Party Committees.....	0 ,	0 ,
(c) Other Political Committees (such as PACs).....	0 ,	0 ,
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	520.00 ,	520.00 ,
12. Transfers From Affiliated/Other Party Committees.....	0 ,	0 ,
13. All Loans Received.....	0 ,	0 ,
14. Loan Repayments Received.....	0 ,	0 ,
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0 ,	0 ,
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0 ,	0 ,
17. Other Federal Receipts (Dividends, Interest, etc.).....	0 ,	0 ,
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0 ,	0 ,
(b) Levin Funds (from Schedule H5).....	0 ,	0 ,
(c) Total Transfers (add 18(a) and 18(b))..	0 ,	0 ,
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	520.00 ,	520.00 ,
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	520.00 ,	520.00 ,

NON-FEDERAL ACCOUNT

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,000.00,	4,000.00,
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4,000.00,	4,000.00,
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4,000.00,	4,000.00,

NOTICE TO NON-GOVERNMENT

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	520.00	520.00
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	520.00	520.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

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**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 1 OF 2	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
**AFOGNAK NATIVE CORPORATION - ALUTHIQ PAC**

Full Name (Last, First, Middle Initial) <b>A. BARNES, ELIJAH</b>			Date of Receipt	
Mailing Address <b>2348 COURT CIRCLE</b>			M M / D D / Y Y Y Y	
City <b>VIRGINIA BEACH</b>	State <b>VA</b>	Zip Code <b>23453</b>	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. <b>C</b>			120.00	
Name of Employer <b>ALUTHIQ, LLC</b>		Occupation <b>VICE PRESIDENT</b>	*\$20 payroll deduction 1/9, 1/23, 2/10 2/25, 3/10, 3/25	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>120.00</b>		

Full Name (Last, First, Middle Initial) <b>B. BREWER, DARRELL G.</b>			Date of Receipt	
Mailing Address <b>6629 STELLA ROAD</b>			M M / D D / Y Y Y Y	
City <b>GOODSPRINGS</b>	State <b>TN</b>	Zip Code <b>38460</b>	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. <b>C</b>			240.00	
Name of Employer <b>AFOGNAK NATIVE CORP.</b>		Occupation <b>SENIOR VICE PRESIDENT</b>	*\$40 payroll deduction 1/9, 1/23, 2/10 2/25, 3/10, 3/25	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>240.00</b>		

Full Name (Last, First, Middle Initial) <b>C. CETTL, WILLIAM C.</b>			Date of Receipt	
Mailing Address <b>5407 FLATROCK COURT</b>			M M / D D / Y Y Y Y <b>01 09 2015</b>	
City <b>MORRISON</b>	State <b>CO</b>	Zip Code <b>80465</b>	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. <b>C</b>			40.00	
Name of Employer <b>COMMUNITY POWER COMPANY</b>		Occupation <b>VICE PRESIDENT</b>	*payroll deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>40.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2 OF 2	
	(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"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AFOGNAK NATIVE CORPORATION - ALUTHIQ PAC**

Full Name (Last, First, Middle Initial) <b>A. MERRICK, KATHY L.</b>		Date of Receipt
Mailing Address <b>16302 ESSEX DRIVE</b>		
City <b>ANCHORAGE</b>	State <b>AK</b>	Zip Code <b>99516</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>120.00</b>
Name of Employer <b>ALUTHIQ, LLC</b>	Occupation <b>VICE PRESIDENT</b>	*\$20 Payroll deduction 1/9, 1/23, 2/10 2/25, 3/10, 3/25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>120.00</b>	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>520.00</b>

2014-10-10 10:11:01 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1			
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC**

Full Name (Last, First, Middle Initial) <b>A. ALASKANS FOR DON YOUNG</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015	
Mailing Address P.O. BOX 100298		Amount of Each Disbursement this Period <b>1,000.00</b>	
City	State		Zip Code
ANCHORAGE	AK		99510
Purpose of Disbursement CONTRIBUTION			11
Candidate Name DON YOUNG		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:		
ALASKA			

Full Name (Last, First, Middle Initial) <b>B. PEOPLE FOR PATTY MURRAY</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015	
Mailing Address 1602 BELLE VIEW BOULEVARD #510		Amount of Each Disbursement this Period <b>1,000.00</b>	
City	State		Zip Code
ALEXANDRIA	VA		22307
Purpose of Disbursement CONTRIBUTION			11
Candidate Name PATTY MURRAY		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:		
Washington			

Full Name (Last, First, Middle Initial) <b>C. TRUE NORTH PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015	
Mailing Address 228 S. WASHINGTON STREET SUITE 115		Amount of Each Disbursement this Period <b>2,000.00</b>	
City	State		Zip Code
ALEXANDRIA	VA		22314
Purpose of Disbursement CONTRIBUTION			11
Candidate Name		Category/ Type	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>4,000.00</b>

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3909 ARCTIC BLVD. SUITE 500

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1050 FIRST STREET, N.E.

WASHINGTON DC 20002

(202) 694-1307

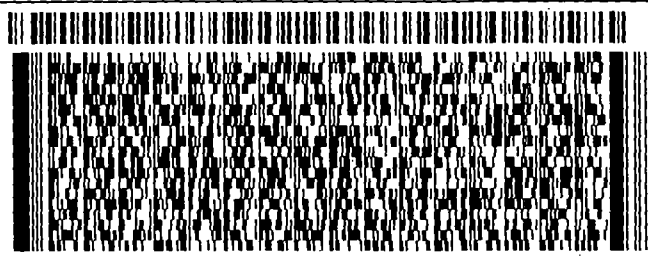
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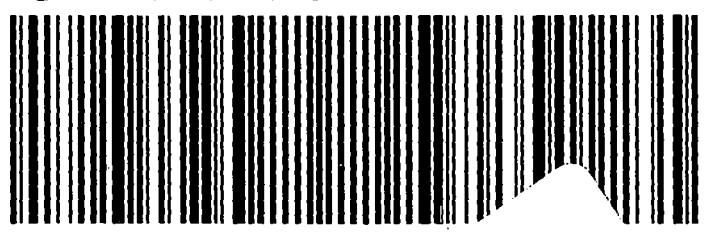


MON - 29 OCT 3:00P  
STANDARD OVERNIGHT

TRK# 7735 7279 2800  
0201

XC YKNA

20002  
DC-US IAD



RT 723  
FZ 722  
2 15:00 2800 10:29

10/25/2018

FVRKRS



CONTAINER INFORMATION

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FED-EX</i>	Shipping Date <i>10-26-18</i>
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER <i>af</i> (3/2015)	DATE PREPARED <i>10-29-18</i>