

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2015 AUG -3 AM 11:50

Office Use Only

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

PGA TOUR, INC., POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 112, PGA TOUR BOULEVARD

Check if different than previously reported. (ACC)

PONTE VEDRA BEACH, FL 32082

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

C00196428

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:
- |                                      |                                      |                                       |   |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11)<br>(Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12)<br>(Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                              |

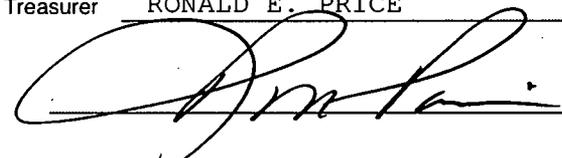
- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |
- Election on MM / DD / YYYY in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|
- Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 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 RONALD E. PRICE

Signature of Treasurer 

Date 07 / 28 / 2015

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

Office Use Only							
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**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PGA TOUR, INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	1

 / 

D	D
0	1

 / 

Y	Y	Y	Y	Y
2	0	1	5	

 To: 

M	M
0	6

 / 

D	D
3	0

 / 

Y	Y	Y	Y	Y
2	0	1	5	

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																	
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>5</td><td></td></tr></table>	Y	Y	Y	Y	Y	2	0	1	5			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>9</td><td>4</td><td>0</td><td>3</td><td>6</td><td>4</td></tr></table>	7	9	4	0	3	6	4
Y	Y	Y	Y	Y															
2	0	1	5																
7	9	4	0	3	6	4													
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>9</td><td>4</td><td>0</td><td>3</td><td>6</td><td>4</td></tr></table>	7	9	4	0	3	6	4											
7	9	4	0	3	6	4													
(c) Total Receipts (from Line 19).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0</td></tr></table>	0	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0</td></tr></table>	0															
0																			
0																			
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>9</td><td>4</td><td>0</td><td>3</td><td>6</td><td>4</td></tr></table>	7	9	4	0	3	6	4	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>9</td><td>4</td><td>0</td><td>3</td><td>6</td><td>4</td></tr></table>	7	9	4	0	3	6	4			
7	9	4	0	3	6	4													
7	9	4	0	3	6	4													
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>6</td><td>3</td><td>8</td><td>1</td><td>4</td></tr></table>	7	6	3	8	1	4	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>6</td><td>3</td><td>8</td><td>1</td><td>4</td></tr></table>	7	6	3	8	1	4					
7	6	3	8	1	4														
7	6	3	8	1	4														
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>1</td><td>7</td><td>6</td><td>5</td><td>5</td><td>0</td></tr></table>	7	1	7	6	5	5	0	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7</td><td>1</td><td>7</td><td>6</td><td>5</td><td>5</td><td>0</td></tr></table>	7	1	7	6	5	5	0			
7	1	7	6	5	5	0													
7	1	7	6	5	5	0													
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0</td></tr></table>	0																	
0																			
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0</td></tr></table>	0																	
0																			

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 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 .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures Bank Charges .....	1 3 8 1 4	1 3 8 1 4
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1 3 8 1 4	1 3 8 1 4
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7 5 0 0 0 0	7 5 0 0 0 0
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7 6 3 8 1 4	7 6 3 8 1 4
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7 6 3 8 1 4	7 6 3 8 1 4

**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) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1 3 8 1 4	1 3 8 1 4
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1 3 8 1 4	1 3 8 1 4

NON-PROFIT CORPORATION



**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 2 OF 2	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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)  
PGA TOUR, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement MM / DD / YYYY 04 / 13 / 2015
Mailing Address 700 TPC BLVD.		Amount of Each Disbursement this Period 2373
City PONTE VEDRA BEACH	State FL	
Zip Code 32082		Category/ Type 001
Purpose of Disbursement BANK CHARGES		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 700 TPC BLVD.		Amount of Each Disbursement this Period 2386
City PONTE VEDRA BEACH	State FL	
Zip Code 32082		Category/ Type 001
Purpose of Disbursement BANK CHARGES		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. WELLS FARGO		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 700 TPC BLVD		Amount of Each Disbursement this Period 2411
City PONTE VEDRA BEACH	State FL	
Zip Code 32082		Category/ Type 001
Purpose of Disbursement BANK CHARGES		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	23814
TOTAL This Period (last page this line number only).....▶	13814

20150511 10:00:00 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 3				
	<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

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NAME OF COMMITTEE (In Full)  
PGA TOUR, INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
VERN BUCHANAN FOR CONGRESS

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2015

Mailing Address  
P.O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement  
Category/Type: 0 1 1

Candidate Name  
VERN BUCHANAN

Amount of Each Disbursement this Period  
1 0 0 0 0 0

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) RE-ELECTION CAMPAIGN  
State: FL District: 16

**B.** Full Name (Last, First, Middle Initial)  
ORRIN PAC

Date of Disbursement  
MM / DD / YYYY  
03 / 09 / 2015

Mailing Address  
5805 32ND STREET, NW

City WASHINGTON State DC Zip Code 20015

Purpose of Disbursement  
Category/Type: 0 1 1

Candidate Name  
ORRIN HATCH

Amount of Each Disbursement this Period  
1 5 0 0 0 0

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) RE-ELECTION CAMPAIGN  
State: UT District:

**C.** Full Name (Last, First, Middle Initial)  
RYAN FOR CONGRESS

Date of Disbursement  
MM / DD / YYYY  
03 / 11 / 2015

Mailing Address  
P.O. BOX 1488

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement  
Category/Type: 0 1 1

Candidate Name  
PAUL RYAN

Amount of Each Disbursement this Period  
1 0 0 0 0 0

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) RE-ELECTION CAMPAIGN  
State: WI District: 1

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

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

UNIVERSITY MICROFILMS

**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 2 OF 3

<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)

PGA TOUR, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

<p><b>A.</b></p> <p>FRIENDS OF SCHUMER</p> <p>Mailing Address 220 I STREET NE, SUITE 250</p> <p>City State Zip Code WASHINGTON DC 20002</p> <p>Purpose of Disbursement</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 04 / 16 / 2015</p>
<p>Candidate Name CHUCK SCHUMER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District:</p>		<p>Amount of Each Disbursement this Period</p> <p>1,000,000</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RE-ELECTION CAMPAIGN</p>		

<p><b>B.</b></p> <p>ORRIN PAC</p> <p>Mailing Address 5805 32ND STREET, NW</p> <p>City State Zip Code WASHINGTON DC 20015</p> <p>Purpose of Disbursement</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 05 / 07 / 2015</p>
<p>Candidate Name ORRIN HATCH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: UT District:</p>		<p>Amount of Each Disbursement this Period</p> <p>1,000,000</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RE-ELECTION CAMPAIGN</p>		

<p><b>C.</b></p> <p>GEORGIANS FOR ISAAKSON</p> <p>Mailing Address 900 19TH STREET NW, 8TH FLOOR</p> <p>City State Zip Code WASHINGTON DC 20006</p> <p>Purpose of Disbursement</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 06 / 15 / 2015</p>
<p>Candidate Name JOHNNY ISAAKSON</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District:</p>		<p>Amount of Each Disbursement this Period</p> <p>1,000,000</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RE-ELECTION CAMPAIGN</p>		

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

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


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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

PGA TOUR, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement	
WYDEN FOR SENATE		MM / DD / YYYY	
Mailing Address		06 / 22 / 2015	
P.O. BOX 3498			
City	State	Zip Code	
PORTLAND	OR	97208	
Purpose of Disbursement		Amount of Each Disbursement this Period	
		0.11	
Candidate Name		Category/Type	
RON WYDEN		011	
Office Sought:	House	Disbursement For:	
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼	
State: OR	District:	RE-ELECTION CAMPAIGN	

<b>B.</b>		Date of Disbursement	
		MM / DD / YYYY	
Mailing Address			
City		State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
Office Sought:	House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State:	District:		

<b>C.</b>		Date of Disbursement	
		MM / DD / YYYY	
Mailing Address			
City		State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
Office Sought:	House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> President	<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).....▶	7,500.00

UNITED STATES POSTAL SERVICE

FIRST-CLASS MAIL

Hasler

07/28/2015

POSTAGE \$007.67

ZIP 32082  
011D12603715



9214 7969 0099 9790 1602 7452 63

FEDERAL ELECTION COMMISSION  
999 E STREET, NW  
WASHINGTON, DC 20463



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2015 AUG -3 AM 11:50

POSTAGE WILL BE PAID BY ADDRESSEE  
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UNITED STATES

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)  
7/28/15

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER  
 (3/2015)

8/3/15  
 DATE PREPARED

NON-FIN | 000 | 001 | 001 | 000-104100