

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Future45

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="599955.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="658908.58"/>	<input type="text" value="1258908.58"/>
(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="1258863.58"/>	<input type="text" value="1258908.58"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="550131.40"/>	<input type="text" value="550176.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="708732.18"/>	<input type="text" value="708732.18"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Future45

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2015 To: MM / DD / YYYY 12 / 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).....	658908.58	1258908.58
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	658908.58	1258908.58
(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)..... ▶	658908.58	1258908.58
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))..... ▶	658908.58	1258908.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	658908.58	1258908.58

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	158880.81	158925.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	158880.81	158925.81
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)	391250.59	391250.59
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)) ..	550131.40	550176.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	550131.40	550176.40

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)	658908.58	1258908.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	658908.58	1258908.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	158880.81	158925.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	158880.81	158925.81

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

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

FOR LINE NUMBER: PAGE 6 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Future45

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

Mailing Address 1040 Lake Shore Rd.

City State Zip Code
Grosse Pointe MI 48236

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

Name of Employer Occupation
Triune Specialty Trailers President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2015
Transaction ID : 001

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 745 5th Ave, Suite 1400

City State Zip Code
New York NY 10151

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

Name of Employer Occupation
The Hertog Foundation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2015
Transaction ID : 002

Amount of Each Receipt this Period
50000.00

Contribution

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

Mailing Address 610 S. Boulevard

City State Zip Code
Tampa FL 33606

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : 003

Amount of Each Receipt this Period
175000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ► 226000.00

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 7 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Future45

Full Name (Last, First, Middle Initial) A. Leora Levy		Date of Receipt 12 / 10 / 2015 Transaction ID : 004
Mailing Address 59 Peckslan Rd.		Amount of Each Receipt this Period 1000.00
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kojai Properties, Inc.		Date of Receipt 12 / 14 / 2015 Transaction ID : 005
Mailing Address 39400 Woodward Suite 250		Amount of Each Receipt this Period 50000.00
City Bloomfield Hills	State MI	Zip Code 48304
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) C. Michael Jandernoa		Date of Receipt 12 / 22 / 2015 Transaction ID : 006
Mailing Address 171 Monroe Avenue, NW Suite 410		Amount of Each Receipt this Period 25000.00
City Grand Rapids	State MI	Zip Code 49503
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer 42 North Partners LLC	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	76000.00
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 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Future45

Full Name (Last, First, Middle Initial) A. Susan Jandernoa		Date of Receipt 12 / 22 / 2015 Transaction ID : 007
Mailing Address 171 Monroe Avenue NW Suite 410		Amount of Each Receipt this Period 25000.00
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer 42 North Partners LLC	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) B. Michael Epstein		Date of Receipt 12 / 31 / 2015 Transaction ID : 008
Mailing Address 5410 Edson Lane Suite 300		Amount of Each Receipt this Period 5000.00
City Rockville	State MD	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Willow Asset Management LLC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Paola Luptak		Date of Receipt 12 / 31 / 2015 Transaction ID : 009
Mailing Address 3923 Devon Court, North		Amount of Each Receipt this Period 25000.00
City Boca Raton	State FL	
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer The Beztak Companies	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	55000.00
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 9 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Future45

A. Linda E McMahon
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Hurlingham Drive
 City Greenwich State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Self-employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **200000.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : 011
 Amount of Each Receipt this Period **200000.00**
 Contribution

B. Ronald Weiser
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 N Main Street Suite 200
 City Ann Arbor State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McKinley Associates, Inc. Occupation Founder
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **100000.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : 010
 Amount of Each Receipt this Period **100000.00**
 Contribution

C. 45Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 710993
 City Herndon State VA Zip Code 20171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1908.58**

Date of Receipt **12 / 31 / 2015**
Transaction ID : 012
 Amount of Each Receipt this Period **1908.58**
 Contribution In-Kind

SUBTOTAL of Receipts This Page (optional).....	301908.58
TOTAL This Period (last page this line number only).....	658908.58

**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)
Future45

Full Name (Last, First, Middle Initial)

A. Jones Day

Mailing Address 51 Louisiana Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.16

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Trinity Financial Reporting & Compliance

Mailing Address P.O. Box 710993

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Accounting and Compliance

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.33

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Outlaw Media

Mailing Address 1000 Wilson Blvd, Suite 2600

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Media production-ad not aired

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.24

Amount of Each Disbursement this Period

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 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)
Future45

Full Name (Last, First, Middle Initial)

A. Jones Day

Mailing Address 51 Louisiana Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.17

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Jones Day

Mailing Address 51 Louisiana Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.18

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Arena Online

Mailing Address 1780 West Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement
Website domain and development

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.7

Amount of Each Disbursement this Period

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 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)
Future45

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address P.O. Box 84314

City State Zip Code
Baton Rouge LA 70884

Purpose of Disbursement
Merchant fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.2

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Red Eagle Media Group

Mailing Address 815 Slaters Lane

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
Digital media-ad not aired

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.27

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Robert Watkins & Company, P.A.

Mailing Address 610 S. Boulevard

City State Zip Code
Tampa FL 33606

Purpose of Disbursement
Accounting and Compliance

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.32

Amount of Each Disbursement this Period

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 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)
Future45

Full Name (Last, First, Middle Initial)

A. Trinity Financial Reporting & Compliance

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	6		2	0	1	5

Mailing Address P.O. Box 710993

Transaction ID : SB.34

City Herndon State VA Zip Code 20171

Amount of Each Disbursement this Period

1	5	7	5	0	0
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Purpose of Disbursement
Accounting and Compliance

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Jones Day

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	1	5

Mailing Address 51 Louisiana Avenue NW

Transaction ID : SB.19

City Washington State DC Zip Code 20001

Amount of Each Disbursement this Period

1	0	2	6	5	0
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Purpose of Disbursement
Legal services

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Anedot

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	1	5

Mailing Address P.O. Box 84314

Transaction ID : SB.3

City Baton Rouge State LA Zip Code 70884

Amount of Each Disbursement this Period

3	9	3	0
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Purpose of Disbursement
Merchant fee

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

1	1	8	7	9	3	0
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--	--	--	--	--	--	--

**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)
Future45

Full Name (Last, First, Middle Initial)

A. Jones Day

Mailing Address 51 Louisiana Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.20

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. McCarthy Hennings Whalen, Inc.

Mailing Address 1850 M Street NW, Suite 235

City Washington State DC Zip Code 20036

Purpose of Disbursement
Media production-ad not aired

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.22

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. McCarthy Hennings Whalen, Inc.

Mailing Address 1850 M Street NW, Suite 235

City Washington State DC Zip Code 20036

Purpose of Disbursement
Media production-ad not aired

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.23

Amount of Each Disbursement this Period

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 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

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)
Future45

Full Name (Last, First, Middle Initial)

A. Trinity Financial Reporting & Compliance

Mailing Address P.O. Box 710993

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Accounting and Compliance

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2015

Transaction ID : SB.35

Amount of Each Disbursement this Period

1875.00

Full Name (Last, First, Middle Initial)

B. 45Committee

Mailing Address P.O. Box 710993

City Herndon State VA Zip Code 20171

Purpose of Disbursement
In-kind Contribution

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SB.36

Amount of Each Disbursement this Period

1908.58

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address P.O. Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement
Merchant fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SB.4

Amount of Each Disbursement this Period

5071.80

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

8855.38

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

158780.81

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Future45
FEC IDENTIFICATION NUMBER
C C00574533
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
45Committee
Mailing Address P.O. Box 710993
City Herndon State VA Zip Code 20171
Purpose of Expenditure Media production/film footage Category/Type 004
Name of Federal Candidate Hillary Clinton Support Oppose Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 311673.88
Date of Public Distribution/Dissemination 12/15/2015
Amount 38000.00
Transaction ID : SB.1
Date of Disbursement or Obligation 12/17/2015
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Arena Online
Mailing Address 1780 West Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Media placement and production Category/Type 004
Name of Federal Candidate Hillary Clinton Support Oppose Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 118789.88
Date of Public Distribution/Dissemination 11/19/2015
Amount 3500.00
Transaction ID : SB.8
Date of Disbursement or Obligation 11/20/2015
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 41500.00
(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.
Maria Wojciechowski [Electronically Filed] Date 01/29/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Future45	FEC IDENTIFICATION NUMBER ▼ C C00574533
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Arena Online	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 26 / 2015
Mailing Address 1780 West Sequoia Vista Circle	Amount 35000.00
City State Zip Code Salt Lake City UT 84104	Transaction ID : SB.11 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 24 / 2015
Purpose of Expenditure Media placement	Category/Type 004
Name of Federal Candidate Hillary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 377750.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Conston Communications	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 11 / 2015
Mailing Address 1758 U Street NW, Unit 3	Amount 15000.00
City State Zip Code Washington DC 20009	Transaction ID : SB.15 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 14 / 2015
Purpose of Expenditure Media production	Category/Type 004
Name of Federal Candidate Hillary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 273673.88	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(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.

Maria Wojciechowski [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Future45
FEC IDENTIFICATION NUMBER
C C00574533
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address 1850 M Street NW, Suite 235
City Washington State DC Zip Code 20036
Purpose of Expenditure Media production Category/Type 004
Name of Federal Candidate Hillary Clinton Support Oppose Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 18650.88
Date of Public Distribution/Dissemination 10/28/2015
Amount 18650.88
Transaction ID : SB.21
Date of Disbursement or Obligation 10/30/2015
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Outlaw Media
Mailing Address 1000 Wilson Blvd, Suite 2600
City Arlington State VA Zip Code 22209
Purpose of Expenditure Media production Category/Type 004
Name of Federal Candidate Hillary Clinton Support Oppose Office Sought: President Senate State:
Calendar Year-To-Date Per Election for Office Sought 316973.88
Date of Public Distribution/Dissemination 12/15/2015
Amount 3000.00
Transaction ID : SB.25
Date of Disbursement or Obligation 10/28/2015
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21650.88
(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.
Signature Maria Wojciechowski [Electronically Filed] Date 01/29/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Future45	FEC IDENTIFICATION NUMBER ▼ C C00574533
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Red Eagle Media Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Mailing Address 815 Slaters Lane	Amount 96639.00
City Alexandria State VA Zip Code 22314	Transaction ID : SB.26 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2015
Purpose of Expenditure Media placement	Category/Type 004
Name of Federal Candidate Hillary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 115289.88	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Red Eagle Media Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 10 / 2015
Mailing Address 815 Slaters Lane	Amount 22384.00
City Alexandria State VA Zip Code 22314	Transaction ID : SB.28 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 08 / 2015
Purpose of Expenditure Media placement	Category/Type 004
Name of Federal Candidate Hillary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 258673.88	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	119023.00
(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.

Maria Wojciechowski [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Future45
FEC IDENTIFICATION NUMBER
C C00574533
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Red Eagle Media Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Media placement Category/
Type
004
Name of Federal Candidate
Hillary Clinton Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
342750.59

Date of Public Distribution/Dissemination
12 / 15 / 2015
Amount
25776.71
Transaction ID : SB.29
Date of Disbursement or Obligation
12 / 17 / 2015
Office Sought:
House District:
Senate State:
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Redprint Strategy
Mailing Address
P.O. Box 710993
City
Herndon State
VA Zip Code
20171
Purpose of Expenditure
Media production Category/
Type
004
Name of Federal Candidate
Hillary Clinton Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
236289.88

Date of Public Distribution/Dissemination
12 / 08 / 2015
Amount
17500.00
Transaction ID : SB.30
Date of Disbursement or Obligation
12 / 10 / 2015
Office Sought:
House District:
Senate State:
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 43276.71
(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.

Maria Wojciechowski
[Electronically Filed]
Date
01 / 29 / 2016
Signature

