

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

FRIENDS OF MIA LOVE

ADDRESS (number and street) PO BOX 255

Check if different than previously reported. (ACC)

RIVERTON UT 84065

2. **FEC IDENTIFICATION NUMBER** ▼ C C00505776

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

CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

UT 04

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)

- Termination Report (TER)

(b) 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

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y

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 PAUL KILGORE

Signature of Treasurer PAUL KILGORE

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 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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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF MIA LOVE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	431948.45	599965.37
(b) Total Contribution Refunds (from Line 20(d))	0.00	11221.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	431948.45	588744.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	258654.11	564407.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	169.44	169.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	258484.67	564237.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	472838.66	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF MIA LOVE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	104508.00	131250.00
(ii) Unitemized.....	199322.53	335597.45
(iii) TOTAL of contributions from individuals ▶	303830.53	466847.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	128117.92	133117.92
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	431948.45	599965.37
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	169.44	169.44
15. OTHER RECEIPTS (Dividends, Interest, etc.)	8561.94	26746.96
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	440679.83	626881.77

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	258654.11	564407.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	11221.00
(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 20(a), (b), and (c)).....	0.00	11221.00
21. OTHER DISBURSEMENTS	0.00	1000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	258654.11	576628.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	290812.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	440679.83
25. SUBTOTAL (add Line 23 and Line 24).....	731492.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	258654.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	472838.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address **PO BOX 3908**

City **CRESTLINE** State **CA** Zip Code **92325**

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

Name of Employer **AINLEY ENTERPRISES LLC** Occupation **PROPERTY MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11AI.192148

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address **PO BOX 3908**

City **CRESTLINE** State **CA** Zip Code **92325**

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

Name of Employer **AINLEY ENTERPRISES LLC** Occupation **PROPERTY MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2015

Transaction ID : SA11AI.192156

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS. PATRICIA A. AINLEY

Mailing Address **PO BOX 3908**

City **CRESTLINE** State **CA** Zip Code **92325**

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

Name of Employer **AINLEY ENTERPRISES LLC** Occupation **PROPERTY MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.196874

Amount of Each Receipt this Period
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. MS. PATRICIA A. AINLEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 21 / 2015	
Mailing Address PO BOX 3908		Transaction ID : SA11AI.196981	
City CRESTLINE	State CA	Zip Code 92325	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. MS. PATRICIA A. AINLEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015	
Mailing Address PO BOX 3908		Transaction ID : SA11AI.196999	
City CRESTLINE	State CA	Zip Code 92325	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) C. MS. PATRICIA A. AINLEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address PO BOX 3908		Transaction ID : SA11AI.197040	
City CRESTLINE	State CA	Zip Code 92325	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 4775 W 105TH DR

City WESTMINSTER State CO Zip Code 80031

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

Name of Employer GREATER CO ANESTHESIA PC Occupation ANESTHESIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11Al.193014

Amount of Each Receipt this Period
 250.00

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

Mailing Address 350 DUBLIN DR APT 2019

City IOWA CITY State IA Zip Code 52246

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11Al.192548

Amount of Each Receipt this Period
 200.00

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

Mailing Address 309 E ST NE

City WASHINGTON State DC Zip Code 20002

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA11Al.190968

Amount of Each Receipt this Period
 250.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 8 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2021 HUNTINGTON LN

City State Zip Code
FORT WORTH TX 76110

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194838

Amount of Each Receipt this Period
75.00

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

Mailing Address 2021 HUNTINGTON LN

City State Zip Code
FORT WORTH TX 76110

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2015

Transaction ID : SA11AI.196694

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. DANA K. ANDERSON

Mailing Address 100 FALL CREEK RD

City State Zip Code
LAWRENCE KS 66049

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

Name of Employer Occupation
MACE RICH REAL ESTATE INVESTMENT TRUST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2015

Transaction ID : SA11AI.187816

Amount of Each Receipt this Period
500.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2266 COUNT FLEET COURT

City SOUTH JORDAN State UT Zip Code 84095

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

Name of Employer OPTUM BANK Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192164

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
ALDON SCOTT ANDERSON

Mailing Address 1326 EAST 3RD AVENUE

City SALT LAKE CITY State UT Zip Code 84103

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

Name of Employer ZIONS BANK Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192174

Amount of Each Receipt this Period
 2700.00

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

Mailing Address 1500 E COLLEGE WAY STE 468

City MOUNT VERNON State WA Zip Code 98273

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : SA11AI.193390

Amount of Each Receipt this Period
 500.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 3470 LAKEVIEW DR

City State Zip Code
SEBRING FL 33870

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11AI.197037

Amount of Each Receipt this Period
250.00

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

Mailing Address 447 EAST 1700 SOUTH

City State Zip Code
BOUNTIFUL UT 84010

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

Name of Employer Occupation
WEBBANK BANK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192166

Amount of Each Receipt this Period
500.00

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

Mailing Address 447 EAST 1700 SOUTH

City State Zip Code
BOUNTIFUL UT 84010

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

Name of Employer Occupation
WEBBANK BANK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11AI.192170

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MS. DORIS BERENZWEIG

Mailing Address 452 MEER AVE

City State Zip Code
WYCKOFF NJ 07481

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11AI.188870

Amount of Each Receipt this Period
500.00

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

Mailing Address 7303 NE 8TH DR

City State Zip Code
BOCA RATON FL 33487

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

Name of Employer Occupation
SELF EMPLOYED EDITOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 16 / 2015

Transaction ID : SA11AI.188031

Amount of Each Receipt this Period
500.00

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

Mailing Address 222 S ELM ST APT 256

City State Zip Code
ARROYO GRANDE CA 93420

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11AI.194602

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. LYNDEL G. BERRY

Mailing Address 21711 KICKAPOO RD

City WALLER State TX Zip Code 77484

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195026

Amount of Each Receipt this Period
250.00

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

Mailing Address 380 OESTERMAN DR

City MONTEREY State TN Zip Code 38574

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SA11AI.191716

Amount of Each Receipt this Period
20.00

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

Mailing Address 380 OESTERMAN DR

City MONTEREY State TN Zip Code 38574

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.193722

Amount of Each Receipt this Period
50.00

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

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

320.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 380 OESTERMAN DR

City State Zip Code
MONTEREY TN 38574

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194848

Amount of Each Receipt this Period
50.00

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

Mailing Address 304 N 7TH AVE

City State Zip Code
IOWA CITY IA 52245

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 11 / 2015

Transaction ID : SA11AI.191695

Amount of Each Receipt this Period
100.00

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

Mailing Address 304 N 7TH AVE

City State Zip Code
IOWA CITY IA 52245

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.192740

Amount of Each Receipt this Period
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 920 N EASTVIEW DR.

City State Zip Code
ALPINE UT 84004

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

Name of Employer Occupation
BRIGHTON BANK BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11AI.191793

Amount of Each Receipt this Period
500.00

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

Mailing Address 1652 SE SKYLINE DR

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2015

Transaction ID : SA11AI.195609

Amount of Each Receipt this Period
35.00

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

Mailing Address 1652 SE SKYLINE DR

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : SA11AI.195837

Amount of Each Receipt this Period
25.00

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

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

560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1336 WALNUT STREET

City KINGMAN State KS Zip Code 67068

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11AI.188869

Amount of Each Receipt this Period
100.00

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

Mailing Address 1336 WALNUT STREET

City KINGMAN State KS Zip Code 67068

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 17 / 2015

Transaction ID : SA11AI.194605

Amount of Each Receipt this Period
100.00

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

Mailing Address 5605 RHONDA RD

City SYKESVILLE State MD Zip Code 21784

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

Name of Employer BOOZ ALLEN HAMILTON Occupation SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2015

Transaction ID : SA11AI.196991

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1 W 67TH ST.

City NEW YORK State NY Zip Code 10023

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **665.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA11AI.189725

Amount of Each Receipt this Period
155.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH M BRYDEN

Mailing Address 1 W 67TH ST.

City NEW YORK State NY Zip Code 10023

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **770.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : SA11AI.193470

Amount of Each Receipt this Period
105.00

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

Mailing Address 8712 GLENMORA DR

City SHREVEPORT State LA Zip Code 71106

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

Name of Employer WKHS Occupation ORTHAPEDEIC SURGEON

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194846

Amount of Each Receipt this Period
500.00

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

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

760.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. DEAN L. BUNTROCK

Mailing Address 1 TOWER LN
STE 2242

City State Zip Code
OAKBROOK TERRACE IL 60181

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA11A1.195700

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID V. BURGETT

Mailing Address 1628 MEADOW VIEW DR

City State Zip Code
MEDFORD OR 97504

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SA11A1.187632

Amount of Each Receipt this Period
250.00

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

Mailing Address 3508 NODDING PINE CT

City State Zip Code
FAIRFAX VA 22033

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11A1.193610

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 18 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **6420 W LAKERIDGE RD**

City **LAKEWOOD** State **CO** Zip Code **80227**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
01 / 20 / 2015

Transaction ID : SA11AI.188560

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH CANON

Mailing Address **102 TIQUEWOOD CIR**

City **ABILENE** State **TX** Zip Code **79605**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
01 / 30 / 2015

Transaction ID : SA11AI.190050

Amount of Each Receipt this Period
1000.00

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

Mailing Address **8540 E PINCHOT AVE**

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

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
03 / 23 / 2015

Transaction ID : SA11AI.195741

Amount of Each Receipt this Period
100.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 895 HWY 173

City: WILMOT State: AR Zip Code: 71676

FEC ID number of contributing federal political committee: C

Name of Employer: B2GOLD Occupation: MECHANICAL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 28 / 2015

Transaction ID : SA11AI.192133

Amount of Each Receipt this Period: 50.00

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

Mailing Address 1256 W 250 S

City: FARMINGTON State: UT Zip Code: 84025

FEC ID number of contributing federal political committee: C

Name of Employer: UBS BANK Occupation: BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 04 / 2015

Transaction ID : SA11AI.191801

Amount of Each Receipt this Period: 500.00

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

Mailing Address 25 AMARILLO DR

City: HOUMA State: LA Zip Code: 70360

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 19 / 2015

Transaction ID : SA11AI.192730

Amount of Each Receipt this Period: 200.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2960 CAMINO DIABLO STE 300

City State Zip Code
WALNUT CREEK CA 94597

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

Name of Employer Occupation
PARK PLACE GROUP REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2015

Transaction ID : SA11Al.188913

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RANDALL M CHESLER

Mailing Address 19 HILLSIDE AVE.

City State Zip Code
SHORT HILLS NJ 07078

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

Name of Employer Occupation
CIT BANKING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11Al.191792

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. ELLOINE M. CLARK

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11Al.192586

Amount of Each Receipt this Period
1600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO. BOX 938**

City **MCALLEN** State **TX** Zip Code **78505**

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

Name of Employer **SELF-EMPLOYED** Occupation **AUTOMOBILE DEALER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2015

Transaction ID : SA11Al.197031

Amount of Each Receipt this Period
200.00

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

Mailing Address **3490 BLACK HAWK RD**

City **LAFAYETTE** State **CA** Zip Code **94549**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 11 / 2015

Transaction ID : SA11Al.191694

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROY C COFFEE III

Mailing Address **770 5TH ST. NW APT. 1002**

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer **COFFEE & ASSOCIATES** Occupation **PRINCIPAL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11Al.195486

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) ELMO S. COLTON		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2015	
Mailing Address 971 E. 5600 S. APT 203		Transaction ID : SA11AI.196541	
City MURRAY	State UT	Zip Code 84121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) ELMO S. COLTON		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 21 / 2015	
Mailing Address 971 E. 5600 S. APT 203		Transaction ID : SA11AI.196888	
City MURRAY	State UT	Zip Code 84121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) ROBIN COOK		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2015	
Mailing Address PO BOX 1196		Transaction ID : SA11AI.192159	
City GRIDKEY	State CA	Zip Code 95948	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 3248 S JASON PL

City WEST VALLEY CITY State UT Zip Code 84119

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194804

Amount of Each Receipt this Period
55.00

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

Mailing Address 3170 WOODLEIGH LN

City CAMERON PARK State CA Zip Code 95682

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11AI.193327

Amount of Each Receipt this Period
35.00

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

Mailing Address 3170 WOODLEIGH LN

City CAMERON PARK State CA Zip Code 95682

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2015

Transaction ID : SA11AI.194383

Amount of Each Receipt this Period
45.00

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 8996 SACKETT DRIVE

City State Zip Code
PARK CITY UT 84098

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

Name of Employer Occupation
MARLIN BUSINESS BANK CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192169

Amount of Each Receipt this Period
500.00

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

Mailing Address 9100 LANSEAIR FARM

City State Zip Code
WELCOME MD 20693

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2015

Transaction ID : SA11AI.195887

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
THOMAS E. DOBSON

Mailing Address 5185 MOUNT ALIFAN DR

City State Zip Code
SAN DIEGO CA 92111

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192839

Amount of Each Receipt this Period
100.00

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

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

660.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2531 S CAMAC ST

City PHILADELPHIA State PA Zip Code 19148

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194821

Amount of Each Receipt this Period
50.00

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

Mailing Address 5611 E 113TH ST

City TULSA State OK Zip Code 74137

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

Name of Employer JOE WEST COMPANY Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : SA11AI.193879

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BOBBY DUNLAP

Mailing Address PO BOX 720

City BATESVILLE State MS Zip Code 38606

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

Name of Employer DUNLAP & KYLE COMPANY Occupation CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192729

Amount of Each Receipt this Period
500.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) ALEX DUNN		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 02 / 2015
Mailing Address 1123 E 1500 S		Transaction ID : SA11AI.192173
City OREM	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer VIVINT	Occupation EXECUTIVE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) NANCY EHLEN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2015
Mailing Address 27484 N CARDINAL LN		Transaction ID : SA11AI.195802
City PEORIA	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) JOHN EHRISMANN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 04 / 2015
Mailing Address 7667 ACOMA TRL		Transaction ID : SA11AI.193723
City YUCCA VALLEY	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 245.00	

SUBTOTAL of Receipts This Page (optional).....	2825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MRS. TED H. EIBEN

Mailing Address **112 ROCHESTER ST**

City **PORT BYRON** State **NY** Zip Code **13140**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : SA11AI.193492

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO BOX 757**

City **KAUFMAN** State **TX** Zip Code **75142**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2015

Transaction ID : SA11AI.197044

Amount of Each Receipt this Period
500.00

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

Mailing Address **6670 VINEYARD DR**

City **PASO ROBLES** State **CA** Zip Code **93446**

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

Name of Employer **SELF EMPLOYED** Occupation **MANUFACTURER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11AI.188866

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 6670 VINEYARD DR

City PASO ROBLES State CA Zip Code 93446

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

Name of Employer SELF EMPLOYED Occupation MANUFACTURER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194812

Amount of Each Receipt this Period
250.00

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

Mailing Address 2006 TILBURY RD

City WATERLOO State IA Zip Code 50701

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA11AI.188998

Amount of Each Receipt this Period
250.00

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

Mailing Address 21 FERNDAL RD

City DEER PARK State IL Zip Code 60010

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2015

Transaction ID : SA11AI.194444

Amount of Each Receipt this Period
135.00

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

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

635.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 4303 FOREST PARK RD

City JACKSONVILLE State FL Zip Code 32210

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11AI.192856

Amount of Each Receipt this Period
1000.00

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

Mailing Address 11 DODGE DR

City WEST HARTFORD State CT Zip Code 06107

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015

Transaction ID : SA11AI.189655

Amount of Each Receipt this Period
250.00

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

Mailing Address 2552 WALNUT AVE.
230

City TUSTIN State CA Zip Code 92780

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11AI.197038

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 30 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2552 WALNUT AVE.
#230

City TUSTIN State CA Zip Code 92780

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : SA11AI.197043

Amount of Each Receipt this Period
 500.00

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

Mailing Address 249 LINDEN ST

City MANCHESTER State NH Zip Code 03104

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2015

Transaction ID : SA11AI.192371

Amount of Each Receipt this Period
 35.00

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

Mailing Address 7928 E PUEBLO AVE.
UNIT 55

City MESA State AZ Zip Code 85208

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11AI.189891

Amount of Each Receipt this Period
 100.00

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

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

635.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
JOYCE M GALE

Mailing Address **7928 E PUEBLO AVE.**
UNIT 55

City **MESA** State **AZ** Zip Code **85208**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
620.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SA11Al.194271

Amount of Each Receipt this Period
150.00

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

Mailing Address **6253 MUIRLOCH CT SOUTH**

City **DUBLIN** State **OH** Zip Code **43017**

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

Name of Employer **COMENITY** Occupation **SENIOR DIRECTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 20 / 2015

Transaction ID : SA11Al.192172

Amount of Each Receipt this Period
1000.00

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

Mailing Address **PO BOX 265**

City **FAR HILLS** State **NJ** Zip Code **07931**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 16 / 2015

Transaction ID : SA11Al.188022

Amount of Each Receipt this Period
500.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 1367**

City **WATERBURY** State **CT** Zip Code **06721**

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

Name of Employer **CLY.DEL MANUFACTURING COMPANY** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11AI.188861

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO BOX 1261**

City **HOUSTON** State **TX** Zip Code **77251**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 03 / 2015

Transaction ID : SA11AI.191190

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ALBERT W GIROTTI PH.D.

Mailing Address **9322 STICKNEY AVE.**

City **WAUWATOSA** State **WI** Zip Code **53226**

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

Name of Employer **MEDICAL COLLEGE OF WISCONSIN** Occupation **PROFESSOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11AI.194182

Amount of Each Receipt this Period
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 845 UN PLAZA
53B

City NEW YORK State NY Zip Code 10017

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

Name of Employer PANORAMA PARTNERS, LLC Occupation OPERATIONS MGR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11AI.197039

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MRS. MYRNA HACKNEY

Mailing Address 13355 SE 43RD PL

City BELLEVUE State WA Zip Code 98006

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194835

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS. BETTY HADDON

Mailing Address 1580 OHIO AVE

City HELENA State MT Zip Code 59601

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11AI.191302

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS S. HAHS

Mailing Address **PO BOX 300014**

City **SAINT LOUIS** State **MO** Zip Code **63130**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA11AI.195693

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
WALDO ALBERT HALE

Mailing Address **98 MAPLE ST**

City **CANISTEO** State **NY** Zip Code **14823**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SA11AI.189651

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WALDO ALBERT HALE

Mailing Address **98 MAPLE ST**

City **CANISTEO** State **NY** Zip Code **14823**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194847

Amount of Each Receipt this Period
50.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) EDWARD HAMM		Date of Receipt MM / DD / YYYY 02 / 03 / 2015
Mailing Address 243 S BEACH RD		Transaction ID : SA11AI.191174
City HOBE SOUND	State FL	
Zip Code 33455		Amount of Each Receipt this Period 800.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer ACOMA OIL	Occupation PARTNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) EDWARD HAMM		Date of Receipt MM / DD / YYYY 03 / 18 / 2015
Mailing Address 243 S BEACH RD		Transaction ID : SA11AI.194858
City HOBE SOUND	State FL	
Zip Code 33455		Amount of Each Receipt this Period 800.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer ACOMA OIL	Occupation PARTNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

Full Name (Last, First, Middle Initial) MR. THEODORE M. HANNAH		Date of Receipt MM / DD / YYYY 01 / 14 / 2015
Mailing Address 11106 BYBEE ST		Transaction ID : SA11AI.187787
City SILVER SPRING	State MD	
Zip Code 20902		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2600 JUNIPER DR

City State Zip Code
AMARILLO TX 79109

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194809

Amount of Each Receipt this Period
500.00

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

Mailing Address 135 WINDSOR DR

City State Zip Code
CALHOUN GA 30701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192848

Amount of Each Receipt this Period
250.00

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

Mailing Address 2339 N 1000 E

City State Zip Code
LEHI UT 84043

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11AI.191791

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. SAM HAUERT		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 24 / 2015
Mailing Address PO BOX 42227		Transaction ID : SA11AI.193139
City TUCSON	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GRANT ROAD LUMBER CO., INC.	Occupation SALES	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. HOWARD HEADLEE		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2015
Mailing Address 12125 NICKLAUS ROAD		Transaction ID : SA11AI.197032
City SANDY	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. JAMES HEDLESTON		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2015
Mailing Address 120 RUFUS RD		Transaction ID : SA11AI.191344
City SILSBEE	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00	

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 120 RUFUS RD

City State Zip Code
SILSBEE TX 77656

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2015

Transaction ID : SA11A1.192359

Amount of Each Receipt this Period
50.00

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

Mailing Address 120 RUFUS RD

City State Zip Code
SILSBEE TX 77656

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11A1.194648

Amount of Each Receipt this Period
35.00

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

Mailing Address 388 QUAIL RUN RD

City State Zip Code
FARMINGTON UT 84025

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11A1.188880

Amount of Each Receipt this Period
500.00

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

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

585.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
CAPT. TATNALL L. HILLMAN RET.

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : SA11AI.193300

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
ROBERTA W. HILLMAN

Mailing Address 504 W. BLEEKER ST.

City ASPEN State CO Zip Code 81611

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 25 / 2015

Transaction ID : SA11AI.195902

Amount of Each Receipt this Period
 2700.00

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

Mailing Address 11388 LEBANON RD

City CINCINNATI State OH Zip Code 45241

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

Name of Employer J C R TECH Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11AI.192463

Amount of Each Receipt this Period
 35.00

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

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

5335.00

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

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

FOR LINE NUMBER: PAGE 40 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 4052 SEMINARY ROAD

City ARLINGTON State VA Zip Code 22304

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

Name of Employer WILLIAMS & JENSEN Occupation PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11AI.197046

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1619 SANFORD AVE

City RICHLAND State WA Zip Code 99354

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

Name of Employer WASHINGTON CLOSURE HARFORD Occupation SENIOR CONSTRUCTION ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 03 / 2015

Transaction ID : SA11AI.193642

Amount of Each Receipt this Period
 200.00

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

Mailing Address 1619 SANFORD AVE

City RICHLAND State WA Zip Code 99354

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

Name of Employer WASHINGTON CLOSURE HARFORD Occupation SENIOR CONSTRUCTION ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11AI.195033

Amount of Each Receipt this Period
 200.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 41 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 5627 AVE. T

City State Zip Code
BROOKLYN NY 11234

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

Name of Employer Occupation
CITY OF NEW YORK COMPUTER SPECIALIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2015

Transaction ID : SA11AI.195903

Amount of Each Receipt this Period
 2700.00

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

Mailing Address 222 WILDBRIER DR

City State Zip Code
BALLWIN MO 63011

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : SA11AI.191343

Amount of Each Receipt this Period
 500.00

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

Mailing Address 222 WILDBRIER DR

City State Zip Code
BALLWIN MO 63011

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195721

Amount of Each Receipt this Period
 75.00

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

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

3275.00

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

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

FOR LINE NUMBER: PAGE 42 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 13923 DUNCANNON DR

City HOUSTON State TX Zip Code 77015

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194653

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 405 CADDIE DRIVE

City DEBARY State FL Zip Code 32713

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

Name of Employer MALCOLM JOHNSON & COMPANY, P.A. Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2015

Transaction ID : SA11AI.190966

Amount of Each Receipt this Period
 _____ 250.00

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

Mailing Address 2507 RUSSELL PKWY

City GREAT BEND State KS Zip Code 67530

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11AI.194319

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 1000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2507 RUSSELL PKWY

City State Zip Code
GREAT BEND KS 67530

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195822

Amount of Each Receipt this Period
 300.00

550.00

B. Full Name (Last, First, Middle Initial)
MR. HARRY JONES

Mailing Address 3116 IROQUOIS DR

City State Zip Code
LAKE HAVASU CITY AZ 86404

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : SA11AI.189493

Amount of Each Receipt this Period
 35.00

210.00

C. Full Name (Last, First, Middle Initial)
MR. HARRY JONES

Mailing Address 3116 IROQUOIS DR

City State Zip Code
LAKE HAVASU CITY AZ 86404

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.194436

Amount of Each Receipt this Period
 100.00

310.00

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

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

435.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 5954 WATERFRONT PLACE

City State Zip Code
LONG BEACH CA 90803

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

Name of Employer Occupation
USBENEFITS INS. SERVICES, LLC CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2015

Transaction ID : SA11AI.196996

Amount of Each Receipt this Period
100.00

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

Mailing Address 95 THOMAS LEIGHTON BLVD

City State Zip Code
CUMBERLAND RI 02864

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

Name of Employer Occupation
JOHN HAN C FINANCIAL PLANNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : SA11AI.193469

Amount of Each Receipt this Period
100.00

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

Mailing Address 11991 36TH ST NW

City State Zip Code
WATFORD CITY ND 58854

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2015

Transaction ID : SA11AI.190051

Amount of Each Receipt this Period
1000.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. BRIAN KELSEY

Mailing Address **PO BOX 1600**

City **MC FARLAND** State **CA** Zip Code **93250**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SA11AI.189653

Amount of Each Receipt this Period
500.00

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

Mailing Address **978 WATERFORD**

City **PROVO** State **UT** Zip Code **84604**

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

Name of Employer
CENTRAL UTAH CLINIC

Occupation
PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 28 / 2015

Transaction ID : SA11AI.192160

Amount of Each Receipt this Period
250.00

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

Mailing Address **176 BAILEY RD**

City **PURLING** State **NY** Zip Code **12470**

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

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 29 / 2015

Transaction ID : SA11AI.197047

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 11**

City **JERICO** State **VT** Zip Code **05465**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SA11AI.187669

Amount of Each Receipt this Period
350.00

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

Mailing Address **12424 WILSHIRE BLVD STE 1040**

City **LOS ANGELES** State **CA** Zip Code **90025**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SA11AI.189602

Amount of Each Receipt this Period
30.00

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

Mailing Address **2211 MILITARY ST**

City **PORT HURON** State **MI** Zip Code **48060**

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

Name of Employer **CARDIOLOGY ASSOCIATES OF PORT HURO** Occupation **ADMINISTRATOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.196903

Amount of Each Receipt this Period
50.00

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

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

430.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) ANNE KURZET		Date of Receipt MM / DD / YYYY 03 / 21 / 2015
Mailing Address 33762 VALLE ROAD		Transaction ID : SA11AI.197045
City SAN JUAN CAPISTRAN	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) JANE KYLE		Date of Receipt MM / DD / YYYY 01 / 05 / 2015
Mailing Address 215 SUMMERHAVEN DR S		Transaction ID : SA11AI.187307
City EAST SYRACUSE	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) JANE KYLE		Date of Receipt MM / DD / YYYY 02 / 23 / 2015
Mailing Address 215 SUMMERHAVEN DR S		Transaction ID : SA11AI.193026
City EAST SYRACUSE	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS H. LATIMER

Mailing Address 1470 KILE RD

City METAMORA State MI Zip Code 48455

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194816

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. LAMBERT LELEVIER

Mailing Address PO BOX 291643

City PHELAN State CA Zip Code 92329

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11AI.194957

Amount of Each Receipt this Period
35.00

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

Mailing Address 724 E GRINNELL DR

City BURBANK State CA Zip Code 91501

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

Name of Employer CALIFORNIA DEPARTMENT OF JUSTICE Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **295.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA11AI.189051

Amount of Each Receipt this Period
50.00

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) HERBERT LEVIN		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2015	
Mailing Address 724 E GRINNELL DR		Transaction ID : SA11AI.191358	
City BURBANK	State CA	Zip Code 91501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer CALIFORNIA DEPARTMENT OF JUSTICE	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 355.00		

Full Name (Last, First, Middle Initial) HERBERT LEVIN		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2015	
Mailing Address 724 E GRINNELL DR		Transaction ID : SA11AI.191371	
City BURBANK	State CA	Zip Code 91501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer CALIFORNIA DEPARTMENT OF JUSTICE	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 355.00		

Full Name (Last, First, Middle Initial) HERBERT LEVIN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 02 / 2015	
Mailing Address 724 E GRINNELL DR		Transaction ID : SA11AI.193493	
City BURBANK	State CA	Zip Code 91501	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer CALIFORNIA DEPARTMENT OF JUSTICE	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 405.00		

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **724 E GRINNELL DR**

City **BURBANK** State **CA** Zip Code **91501**

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

Name of Employer **CALIFORNIA DEPARTMENT OF JUSTICE** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **440.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SA11AI.194303

Amount of Each Receipt this Period
35.00

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

Mailing Address **724 E GRINNELL DR**

City **BURBANK** State **CA** Zip Code **91501**

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

Name of Employer **CALIFORNIA DEPARTMENT OF JUSTICE** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **480.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194667

Amount of Each Receipt this Period
40.00

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

Mailing Address **PO BOX 362**

City **HEBER CITY** State **UT** Zip Code **84032**

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

Name of Employer **ATECH LOGISTICS** Occupation **TRUCK DRIVER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA11AI.195695

Amount of Each Receipt this Period
100.00

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

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

175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 914 THAYER ST

City State Zip Code
PLYMOUTH IN 46563

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2015

Transaction ID : SA11A1.187865

Amount of Each Receipt this Period
100.00

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

Mailing Address 4380 VIREO AVE APT 31

City State Zip Code
BRONX NY 10470

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
370.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2015

Transaction ID : SA11A1.187788

Amount of Each Receipt this Period
100.00

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

Mailing Address 4380 VIREO AVE APT 31

City State Zip Code
BRONX NY 10470

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
470.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SA11A1.189671

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) ANGELO LUINA		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2015	
Mailing Address 4380 VIREO AVE APT 3I		Transaction ID : SA11AI.193011	
City BRONX	State NY	Zip Code 10470	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 620.00		

Full Name (Last, First, Middle Initial) ANGELO LUINA		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2015	
Mailing Address 4380 VIREO AVE APT 3I		Transaction ID : SA11AI.193275	
City BRONX	State NY	Zip Code 10470	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 720.00		

Full Name (Last, First, Middle Initial) MR. JOHN J. LYONS		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2015	
Mailing Address 2825 W BROAD AVE		Transaction ID : SA11AI.187818	
City SPOKANE	State WA	Zip Code 99205	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 5943 PINECROFT DR

City WEST BLOOMFIELD State MI Zip Code 48322

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SA11AI.187656

Amount of Each Receipt this Period
100.00

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

Mailing Address 5943 PINECROFT DR

City WEST BLOOMFIELD State MI Zip Code 48322

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.193710

Amount of Each Receipt this Period
50.00

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

Mailing Address 325 ARAPAHO E

City SHERMAN State TX Zip Code 75092

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195780

Amount of Each Receipt this Period
35.00

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

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

185.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. JAMES T. MARCUM

Mailing Address 913 9TH ST

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195737

Amount of Each Receipt this Period
50.00

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

Mailing Address 9 DIAMOND DR

City KEY WEST State FL Zip Code 33040

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2015

Transaction ID : SA11AI.193823

Amount of Each Receipt this Period
500.00

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

Mailing Address 9 DIAMOND DR

City KEY WEST State FL Zip Code 33040

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195824

Amount of Each Receipt this Period
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 356 DALE RD

City State Zip Code
BETHEL PARK PA 15102

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

Name of Employer Occupation
EASTMAN CHEMICAL CHEMICAL ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11Al.194314

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. NANCY MCEVOY

Mailing Address 943 E KORTSEN RD UNIT 15

City State Zip Code
CASA GRANDE AZ 85122

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2015

Transaction ID : SA11Al.193160

Amount of Each Receipt this Period
250.00

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

Mailing Address 4873 CROSS CREEK LN

City State Zip Code
SALT LAKE CTY UT 84107

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2015

Transaction ID : SA11Al.187814

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 567**

City **COLLEGEDALE** State **TN** Zip Code **37315**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 06 / 2015

Transaction ID : SA11AI.187314

Amount of Each Receipt this Period
1500.00

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

Mailing Address **PO BOX 567**

City **COLLEGEDALE** State **TN** Zip Code **37315**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 20 / 2015

Transaction ID : SA11AI.188561

Amount of Each Receipt this Period
1500.00

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

Mailing Address **PO BOX 567**

City **COLLEGEDALE** State **TN** Zip Code **37315**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 20 / 2015

Transaction ID : SA11AI.197137

Amount of Each Receipt this Period
-300.00

**[MEMO ITEM]
REDESIGNATED TO G-2016**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 567**

City **COLLEGEDALE** State **TN** Zip Code **37315**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 20 / 2015

Transaction ID : SA11AI.197138

Amount of Each Receipt this Period
300.00

**[MEMO ITEM]
REDESIGNATED FROM P-2016**

B. Full Name (Last, First, Middle Initial)
MR. BILL MCLAUGHLIN

Mailing Address **1510 E PALM AVE APT A405**

City **TAMPA** State **FL** Zip Code **33605**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA11AI.189056

Amount of Each Receipt this Period
70.00

C. Full Name (Last, First, Middle Initial)
MR. BILL MCLAUGHLIN

Mailing Address **1510 E PALM AVE APT A405**

City **TAMPA** State **FL** Zip Code **33605**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195742

Amount of Each Receipt this Period
70.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) E. MEREWETHER		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2015
Mailing Address PO BOX 1870		Transaction ID : SA11AI.195050
City ARVADA	State CO	Zip Code 80001
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 70.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00	

Full Name (Last, First, Middle Initial) MR PAUL Z. MILES		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2015
Mailing Address 1077 RIVER RD APT 201		Transaction ID : SA11AI.189877
City EDGEWATER	State NJ	Zip Code 07020
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) KENDALL MILLER		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2015
Mailing Address 7350 WAKEFIELD AVE		Transaction ID : SA11AI.191183
City REEDLEY	State CA	Zip Code 93654
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer KENCAROL INC	Occupation FARM MANAGER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 25331 DERBYHILL DR

City LAGUNA HILLS State CA Zip Code 92653

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

Name of Employer PACIFIC KIM CAPITAL, INC. Occupation DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195745

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
GENIE WILHELMSSEN MONTGOMERY

Mailing Address 9378 S LAUREL RIDGE CIR

City WEST JORDAN State UT Zip Code 84088

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 12 / 2015

Transaction ID : SA11AI.187432

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
NATHAN J MORGAN

Mailing Address 1529 YALE AVE.

City SALT LAKE CITY State UT Zip Code 84105

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

Name of Employer CONTINENTAL BANK Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.191800

Amount of Each Receipt this Period
500.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
CMDR. ELMO MOSS

Mailing Address 5625 COUNTY ROAD 441

City HANNIBAL State MO Zip Code 63401

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2015

Transaction ID : SA11AI.194434

Amount of Each Receipt this Period
500.00

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

Mailing Address 632 PALMER RD APT 6E

City YONKERS State NY Zip Code 10701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 03 / 2015

Transaction ID : SA11AI.191170

Amount of Each Receipt this Period
100.00

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

Mailing Address 175 SO MAIN ST 1310

City SALT LAKE CITY State UT Zip Code 84111

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 20 / 2015

Transaction ID : SA11AI.192850

Amount of Each Receipt this Period
375.00

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

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

975.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 980847**

City **PARK CITY** State **UT** Zip Code **84098**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.191747

Amount of Each Receipt this Period
2600.00

SEE MEMO ENTRY

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

Mailing Address **1937 MAPLE HOLLOW WAY**

City **BOUNTIFUL** State **UT** Zip Code **84010**

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

Name of Employer **KELLER INVESTMENTS** Occupation **INVESTMENTS**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.191756

Amount of Each Receipt this Period
2600.00

**[MEMO ITEM]
PARTNERSHIP NAHA LLC**

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

Mailing Address **PO BOX 980847**

City **PARK CITY** State **UT** Zip Code **84098**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.191748

Amount of Each Receipt this Period
2400.00

SEE MEMO ENTRY

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1937 MAPLE HOLLOW WAY

City BOUNTIFUL State UT Zip Code 84010

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

Name of Employer KELLER INVESTMENTS Occupation INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.191757

Amount of Each Receipt this Period
2400.00

**[MEMO ITEM]
PARTNERSHIP NAHA LLC**

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

Mailing Address 735 HIGHLAND AVENUE

City BOULDER State CO Zip Code 80302

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

Name of Employer SELF EMPLOYED Occupation COMPUTING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2015

Transaction ID : SA11AI.192161

Amount of Each Receipt this Period
250.00

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

Mailing Address 735 HIGHLAND AVENUE

City BOULDER State CO Zip Code 80302

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

Name of Employer SELF EMPLOYED Occupation COMPUTING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11AI.197035

Amount of Each Receipt this Period
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 563**

City **WHITE SALMON** State **WA** Zip Code **98672**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 16 / 2015

Transaction ID : SA11AI.188020

Amount of Each Receipt this Period
100.00

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

Mailing Address **1138 WEST RIDGETOP COVE**

City **SOUTH JORDAN** State **UT** Zip Code **84095**

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

Name of Employer **CELTIC BANK** Occupation **MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.192163

Amount of Each Receipt this Period
500.00

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

Mailing Address **8651 RANCHERIA RD**

City **BAKERSFIELD** State **CA** Zip Code **93306**

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

Name of Employer **BRAVO MANAGEMENT CO** Occupation **FARMER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA11AI.195682

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 6625 S JAMESTOWN AVE

City State Zip Code
TULSA OK 74136

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : SA11AI.191335

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PATRICIA O'BRIEN

Mailing Address 535 E 86TH ST # 20D

City State Zip Code
NEW YORK NY 10028

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2015

Transaction ID : SA11AI.193161

Amount of Each Receipt this Period
300.00

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

Mailing Address 1742 N FITZGERALD LN

City State Zip Code
HANFORD CA 93230

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2015

Transaction ID : SA11AI.194625

Amount of Each Receipt this Period
100.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 353 NORTH 1040 EAST

City State Zip Code
SPRINGVILLE UT 84663

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

Name of Employer Occupation
CENTRAL BANK BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : SA11AI.192168

Amount of Each Receipt this Period
500.00

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

Mailing Address 282 LAROE RD.

City State Zip Code
CHESTER NY 10918

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Transaction ID : SA11AI.190049

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EDITH P PALMER

Mailing Address 282 LAROE RD.

City State Zip Code
CHESTER NY 10918

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.192707

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 10 BROWNS RIVER ROAD 2

City BAYPORT State NY Zip Code 11705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.192725

Amount of Each Receipt this Period
50.00

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

Mailing Address 10 BROWNS RIVER ROAD 2

City BAYPORT State NY Zip Code 11705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SA11AI.195690

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. NELSON L. PAYNE

Mailing Address 37119 SABER CT

City GREENBACKVILLE State VA Zip Code 23356

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SA11AI.187658

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR PAUL W. PEELER

Mailing Address 11649 LEOPARD ST STE 3

City CRP CHRISTI	State TX	Zip Code 78410
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192751

Amount of Each Receipt this Period
250.00

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

Mailing Address PO BOX 330

City BINGHAMTON	State NY	Zip Code 13902
--------------------	-------------	-------------------

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

Name of Employer PHELPS CORPORATION	Occupation TREASURER
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2015

Transaction ID : SA11AI.193269

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. LLOYD J. PICKERING

Mailing Address 6412 MOSS AGATE DR

City LAS VEGAS	State NV	Zip Code 89131
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 16 / 2015

Transaction ID : SA11AI.188017

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR THOMAS M. PITTENGER

Mailing Address 170 PINECREST DR LOT 8

City WILLIAMSPORT State PA Zip Code 17701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : SA11AI.193448

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR THOMAS M. PITTENGER

Mailing Address 170 PINECREST DR LOT 8

City WILLIAMSPORT State PA Zip Code 17701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194698

Amount of Each Receipt this Period
 70.00

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

Mailing Address 4327 PERSHING DR

City EL PASO State TX Zip Code 79903

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194712

Amount of Each Receipt this Period
 35.00

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

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

355.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 696**

City **GARBERVILLE** State **CA** Zip Code **95542**

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

Name of Employer **SELF EMPLOYED** Occupation **HOTELIER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2015

Transaction ID : SA11AI.190967

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. LUCILE PRIOR

Mailing Address **5046 117TH AVE SE**

City **BELLEVUE** State **WA** Zip Code **98006**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195735

Amount of Each Receipt this Period
75.00

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

Mailing Address **PTY 11826, 7801 NW 37TH ST**

City **DORAL** State **FL** Zip Code **33166**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.197041

Amount of Each Receipt this Period
250.00

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

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

575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) JOSEPH PUTNAM		Date of Receipt MM / DD / YYYY 02 / 24 / 2015
Mailing Address 55 MISSION TRAIL RD		Transaction ID : SA11AI.193090
City WOODSIDE	State CA	
Zip Code 94062		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer PUTNAM AUTOMOTIVE	Occupation AUTO DEALER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) JOSEPH PUTNAM		Date of Receipt MM / DD / YYYY 02 / 24 / 2015
Mailing Address 55 MISSION TRAIL RD		Transaction ID : SA11AI.197135
City WOODSIDE	State CA	
Zip Code 94062		Amount of Each Receipt this Period -300.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] REDESIGNATED TO G-2016
Name of Employer PUTNAM AUTOMOTIVE	Occupation AUTO DEALER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) JOSEPH PUTNAM		Date of Receipt MM / DD / YYYY 02 / 24 / 2015
Mailing Address 55 MISSION TRAIL RD		Transaction ID : SA11AI.197136
City WOODSIDE	State CA	
Zip Code 94062		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] REDESIGNATED FROM P-2016
Name of Employer PUTNAM AUTOMOTIVE	Occupation AUTO DEALER	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
FRIENDS OF MIA LOVE

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

Mailing Address 55 MISSION TRAIL RD

City: WOODSIDE State: CA Zip Code: 94062

FEC ID number of contributing federal political committee: C

Name of Employer: PUTNAM AUTOMOTIVE Occupation: AUTO DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 03 / 26 / 2015

Transaction ID : SA11AI.195904

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN RANGOS SR.

Mailing Address 701 OSPREY POINT CIR

City: BOCA RATON State: FL Zip Code: 33431

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 29 / 2015

Transaction ID : SA11AI.190029

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
H. LEWIS RAPAPORT

Mailing Address 620 FIFTH AVE.

City: PELHAM State: NY Zip Code: 10803

FEC ID number of contributing federal political committee: C

Name of Employer: COMPONENT ASSEMBLY SYSTEMS Occupation: CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 02 / 28 / 2015

Transaction ID : SA11AI.192165

Amount of Each Receipt this Period: 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR H. CARL RECKNAGEL

Mailing Address 375 STATE ROAD 67 APT 258B

City DOUSMAN	State WI	Zip Code 53118
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11AI.192413

Amount of Each Receipt this Period
1000.00

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

Mailing Address 15736 GLENISLE WAY

City FORT MYERS	State FL	Zip Code 33912
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195719

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. TOM E. REILLY JR.

Mailing Address 8877 PICKWICK DR

City INDIANAPOLIS	State IN	Zip Code 46260
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2015

Transaction ID : SA11AI.190084

Amount of Each Receipt this Period
250.00

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

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

1550.00

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

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

FOR LINE NUMBER: PAGE 73 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
FRIENDS OF MIA LOVE

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

Mailing Address 601 VILLAGE WAY APT 50

City WALLA WALLA State WA Zip Code 99362

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11AI.194308

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL RICE

Mailing Address 466 GLYN TAWEL DR

City GRANVILLE State OH Zip Code 43023

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : SA11AI.189512

Amount of Each Receipt this Period
500.00

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

Mailing Address 2831 DOUBLE EAGLE DR

City DAYTON State OH Zip Code 45431

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

Name of Employer
IRONGATE REALTORS

Occupation
REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2015

Transaction ID : SA11AI.188722

Amount of Each Receipt this Period
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

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

Mailing Address **PO BOX 396**

City **BUNKER HILL** State **WV** Zip Code **25413**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11AI.195826

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. MARY K. RIEG

Mailing Address **502N N LATHAM ST**

City **ALEXANDRIA** State **VA** Zip Code **22304**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : SA11AI.193050

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES RIGGS

Mailing Address **15 THOMAS POINTE DR**

City **FORT THOMAS** State **KY** Zip Code **41075**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194814

Amount of Each Receipt this Period
50.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195723

Amount of Each Receipt this Period
40.00

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

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195729

Amount of Each Receipt this Period
25.00

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

Mailing Address 4804 NW BETHANY BLVD STE I-2

City PORTLAND State OR Zip Code 97229

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2015

Transaction ID : SA11AI.187385

Amount of Each Receipt this Period
125.00

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

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

190.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 4804 NW BETHANY BLVD STE I-2

City: PORTLAND State: OR Zip Code: 97229

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 410.00

Date of Receipt: 01 / 20 / 2015

Transaction ID : SA11AI.188612

Amount of Each Receipt this Period: 35.00

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

Mailing Address 4804 NW BETHANY BLVD STE I-2

City: PORTLAND State: OR Zip Code: 97229

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 510.00

Date of Receipt: 03 / 18 / 2015

Transaction ID : SA11AI.194840

Amount of Each Receipt this Period: 100.00

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

Mailing Address 1929 E ROCKLIN DR

City: SANDY State: UT Zip Code: 84092

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

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 25 / 2015

Transaction ID : SA11AI.195854

Amount of Each Receipt this Period: 100.00

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

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

235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) LANCE RODMAN		Date of Receipt MM / DD / YYYY 02 / 28 / 2015
Mailing Address 2206 WOOD CLIFF CT		Transaction ID : SA11AI.192162
City ARLINGTON	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer TARRANT COUNTY SHERIFF	Occupation SHERIFF	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) PAUL ROGERS		Date of Receipt MM / DD / YYYY 02 / 23 / 2015
Mailing Address 524 VINTAGE DRIVE		Transaction ID : SA11AI.192176
City PROVO	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer SELF-EMPLOYED	Occupation PUBLIC RELATIONS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) SUSAN ROGERS		Date of Receipt MM / DD / YYYY 02 / 23 / 2015
Mailing Address 524 VINTAGE DRIVE		Transaction ID : SA11AI.192177
City PROVO	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	5800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
ROBIN G. ROGERSON

Mailing Address 3848 JENNINGS ST.

City SAN DIEGO State CA Zip Code 92106

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **401.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2015

Transaction ID : SA11AI.191666

Amount of Each Receipt this Period
200.00

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

Mailing Address 330 S OCEAN BLVD APT 3B

City PALM BEACH State FL Zip Code 33480

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 16 / 2015

Transaction ID : SA11AI.187994

Amount of Each Receipt this Period
300.00

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

Mailing Address 7117 PELICAN BAY BLVD
PETHOUSE 16

City NAPLES State FL Zip Code 34108

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : SA11AI.191245

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **49 E E ST**

City **ENCINITAS** State **CA** Zip Code **92024**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195059

Amount of Each Receipt this Period
100.00

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

Mailing Address **PO BOX 310**

City **DAYS CREEK** State **OR** Zip Code **97429**

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

Name of Employer **SELF EMPLOYED** Occupation **CATTLE RANCHER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SA11AI.189061

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DON P. SAVELL

Mailing Address **2005 WESTCHESTER AVE**

City **CATONSVILLE** State **MD** Zip Code **21228**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 30 / 2015

Transaction ID : SA11AI.190090

Amount of Each Receipt this Period
200.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 741 N MANASOTA KEY RD

City State Zip Code
ENGLEWOOD FL 34223

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2015

Transaction ID : SA11AI.188740

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MS. DIANE SCHULTE

Mailing Address 4555 BARBARA AVE

City State Zip Code
INVER GROVE HEIG MN 55077

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.196940

Amount of Each Receipt this Period
50.00

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

Mailing Address 4 RADCLIFF CT

City State Zip Code
RANCHO MIRAGE CA 92270

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2015

Transaction ID : SA11AI.193646

Amount of Each Receipt this Period
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR CHARLES D. SEARS

Mailing Address 3609 VIA LA SELVA

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : SA11AI.193284

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS A. SEENO

Mailing Address 1850 MT DIABLO BLVD STE 440

City WALNUT CREEK State CA Zip Code 94596

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2015

Transaction ID : SA11AI.190021

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS D. SHAFFNER

Mailing Address PO BOX 394

City FRYEBURG State ME Zip Code 04037

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : SA11AI.193025

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. GEORGE P. SHELTON

Mailing Address 4124 KINGSFERRY DR

City ARLINGTON State TX Zip Code 76016

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11Al.194597

Amount of Each Receipt this Period
100.00

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

Mailing Address 1002 BROOKSBERRY CV

City OXFORD State MS Zip Code 38655

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **229.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11Al.194610

Amount of Each Receipt this Period
53.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN J. SIEFFERT JR.

Mailing Address 740 RANDALL DR

City TROY State MI Zip Code 48085

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11Al.192574

Amount of Each Receipt this Period
100.00

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

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

253.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. JOHN J. SIEFFERT JR.

Mailing Address 740 RANDALL DR

City State Zip Code
TROY MI 48085

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
401.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2015

Transaction ID : SA11AI.195698

Amount of Each Receipt this Period
200.00

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

Mailing Address 190 E 72ND ST APT 28D

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11AI.189888

Amount of Each Receipt this Period
500.00

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

Mailing Address 2230 W RIVERSIDE AVE APT 101

City State Zip Code
SPOKANE WA 99201

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

Name of Employer Occupation
POTLATCH CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2015

Transaction ID : SA11AI.195853

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2015

Transaction ID : SA11AI.189983

Amount of Each Receipt this Period
100.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11AI.191291

Amount of Each Receipt this Period
35.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11AI.192102

Amount of Each Receipt this Period
40.00

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

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

175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
345.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015

Transaction ID : SA11AI.192121

Amount of Each Receipt this Period
50.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : SA11AI.193450

Amount of Each Receipt this Period
150.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.194675

Amount of Each Receipt this Period
35.00

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

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

235.00

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

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

FOR LINE NUMBER: PAGE 86 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
780.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.195740

Amount of Each Receipt this Period
150.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
780.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11AI.196983

Amount of Each Receipt this Period
100.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
805.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : SA11AI.196675

Amount of Each Receipt this Period
25.00

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

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

275.00

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

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

FOR LINE NUMBER: PAGE 87 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
855.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 28 2015

Transaction ID : SA11AI.196919

Amount of Each Receipt this Period
50.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
905.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 30 2015

Transaction ID : SA11AI.196927

Amount of Each Receipt this Period
50.00

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

Mailing Address 420 S. BANANA RIVER BLVD.

City State Zip Code
COCOA BEACH FL 32931

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1005.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 31 2015

Transaction ID : SA11AI.197003

Amount of Each Receipt this Period
100.00

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 88 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. HARRIS SIMMONS

Mailing Address 475 OAK FOREST ROAD

City State Zip Code
SALT LAKE CITY UT 84103

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

Name of Employer Occupation
ZIONS BANCORPORATION BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192175

Amount of Each Receipt this Period
2700.00

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

Mailing Address 684 RIDGE RD

City State Zip Code
SPRING CITY PA 19475

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192846

Amount of Each Receipt this Period
300.00

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

Mailing Address 2904 DIAMOND A DR

City State Zip Code
ROSWELL NM 88201

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11AI.193726

Amount of Each Receipt this Period
150.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 861 KENT RD

City WAYNESBORO State VA Zip Code 22980

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SA11AI.194269

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. LARRY R. SMITH

Mailing Address 6428 ROCKY LN

City PARADISE State CA Zip Code 95969

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 23 / 2015

Transaction ID : SA11AI.192986

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MR. LARRY R. SMITH

Mailing Address 6428 ROCKY LN

City PARADISE State CA Zip Code 95969

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **385.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SA11AI.194315

Amount of Each Receipt this Period
150.00

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

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

235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. LARRY R. SMITH

Mailing Address 6428 ROCKY LN

City PARADISE State CA Zip Code 95969

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **505.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195057

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. LARRY R. SMITH

Mailing Address 6428 ROCKY LN

City PARADISE State CA Zip Code 95969

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **505.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195058

Amount of Each Receipt this Period
70.00

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

Mailing Address 1270 JESSIS MEADOW WAY

City WEST BOUNTIFUL State UT Zip Code 84087

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195053

Amount of Each Receipt this Period
200.00

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

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

320.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 555 5TH AVE NE PH 2

City SAINT PETERSBURG State FL Zip Code 33701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11AI.193056

Amount of Each Receipt this Period
 500.00

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

Mailing Address 3765 W EASTMAN AVE

City DENVER State CO Zip Code 80236

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2015

Transaction ID : SA11AI.191661

Amount of Each Receipt this Period
 100.00

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

Mailing Address 3765 W EASTMAN AVE

City DENVER State CO Zip Code 80236

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192739

Amount of Each Receipt this Period
 75.00

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

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

675.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

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

Mailing Address 2449 N 600 W

City PLEASANT GROVE State UT Zip Code 84062

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

Name of Employer DOTERRA Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2015

Transaction ID : SA11AI.197042

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
RONALD W. STRAHAN M.D.

Mailing Address 1260 15TH STREET, SUITE 917

City SANTA MONICA State CA Zip Code 90404

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11AI.194135

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
RONALD W. STRAHAN M.D.

Mailing Address 1260 15TH STREET, SUITE 917

City SANTA MONICA State CA Zip Code 90404

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2015

Transaction ID : SA11AI.197033

Amount of Each Receipt this Period
 250.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) NEAL STROHMEYER		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2015
Mailing Address 92 PINE HILL RD		Transaction ID : SA11AI.191180
City TUXEDO PARK	State NY Zip Code 10987	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer TRIANGLE MANUFACTURING CO	Occupation ADMINISTRATION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) NEAL STROHMEYER		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2015
Mailing Address 92 PINE HILL RD		Transaction ID : SA11AI.193031
City TUXEDO PARK	State NY Zip Code 10987	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer TRIANGLE MANUFACTURING CO	Occupation ADMINISTRATION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) NEAL STROHMEYER		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2015
Mailing Address 92 PINE HILL RD		Transaction ID : SA11AI.194844
City TUXEDO PARK	State NY Zip Code 10987	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer TRIANGLE MANUFACTURING CO	Occupation ADMINISTRATION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 94 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1082 N 150 W

City State Zip Code
AMERICAN FORK UT 84003

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.192841

Amount of Each Receipt this Period
150.00

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

Mailing Address PO BOX 898

City State Zip Code
CANYON TX 79015

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.196853

Amount of Each Receipt this Period
35.00

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

Mailing Address 2022 CHEVIOT DR

City State Zip Code
INVERNESS IL 60010

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

Name of Employer Occupation
EMKAY INC. CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11AI.189882

Amount of Each Receipt this Period
250.00

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

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

435.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) STEVEN TEW		Date of Receipt MM / DD / YYYY 02 / 20 / 2015
Mailing Address 8633 PARLEYS LN		Transaction ID : SA11AI.192167
City PARK CITY	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer 4LIFE RESEARCH	Occupation MANAGEMENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) PAUL F THOME		Date of Receipt MM / DD / YYYY 03 / 04 / 2015
Mailing Address 48 W BROADWAY APT. 905		Transaction ID : SA11AI.191794
City SALT LAKE CITY	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ROBERT THORNTON		Date of Receipt MM / DD / YYYY 03 / 29 / 2015
Mailing Address 7928 VISTA RIDGE DR N		Transaction ID : SA11AI.197036
City FORT WORTH	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF EMPLOYED	Occupation OIL & GAS EXPLORATION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. JOHN S. TOWNSEND JR.

Mailing Address 8306 ROAD 32 NE

City MOSES LAKE State WA Zip Code 98837

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11AI.189872

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN S. TOWNSEND JR.

Mailing Address 8306 ROAD 32 NE

City MOSES LAKE State WA Zip Code 98837

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11AI.194609

Amount of Each Receipt this Period
200.00

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

Mailing Address 1607 EDGERTON PL

City CROFTON State MD Zip Code 21114

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

Name of Employer EAST WEST LINCOLN MERCURY Occupation NEW CAR DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11AI.188875

Amount of Each Receipt this Period
100.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1607 EDGERTON PL

City State Zip Code
CROFTON MD 21114

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

Name of Employer Occupation
EAST WEST LINCOLN MERCURY NEW CAR DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
251.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194830

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
VIRGINIA A. TROTTER

Mailing Address PO BOX 162

City State Zip Code
ARCADIA NE 68815

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SA11AI.187628

Amount of Each Receipt this Period
200.00

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

Mailing Address 558 TIMBER RIDGE DRIVE

City State Zip Code
TROPHY CLUB TX 76262

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 06 / 2015

Transaction ID : SA11AI.197022

Amount of Each Receipt this Period
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) JACK TURNER		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2015
Mailing Address 2326 SW 122ND ST		Transaction ID : SA11AI.194501
City OKLAHOMA CITY	State OK	Zip Code 73170
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MATT VAN PAEPEGHEM		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2015
Mailing Address 204 BLAIR VALLEY DRIVE NE		Transaction ID : SA11AI.190969
City MARIETTA	State GA	Zip Code 30060
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer WENMARR MANAGEMENT COMPANY LLC	Occupation PRESIDENT, OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MATT VAN PAEPEGHEM		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 27 / 2015
Mailing Address 204 BLAIR VALLEY DRIVE NE		Transaction ID : SA11AI.192150
City MARIETTA	State GA	Zip Code 30060
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer WENMARR MANAGEMENT COMPANY LLC	Occupation PRESIDENT, OWNER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MATT VAN PAEPEGHEM

Mailing Address 204 BLAIR VALLEY DRIVE NE

City MARIETTA State GA Zip Code 30060

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

Name of Employer WENMARR MANAGEMENT COMPANY LLC Occupation PRESIDENT, OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2015

Transaction ID : SA11AI.197030

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
STEWART VAN SCOYOC

Mailing Address 131 YARNICK RD

City GREAT FALLS State VA Zip Code 22066

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

Name of Employer VAN SCOYOC ASSOCIATES Occupation PRESIDENT AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11AI.195487

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DR. L. VOEGELE

Mailing Address 137 MIRACLE DR

City AIKEN State SC Zip Code 29801

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

Name of Employer SELF EMPLOYED Occupation SURGEON

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2015

Transaction ID : SA11AI.188692

Amount of Each Receipt this Period
200.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) JEARL WALKER		Date of Receipt MM / DD / YYYY 02 / 25 / 2015
Mailing Address 6917 BAL LAKE DR		Transaction ID : SA11AI.193192
City FORT WORTH	State TX	
Zip Code 76116		Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C	Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.00	

Full Name (Last, First, Middle Initial) JEARL WALKER		Date of Receipt MM / DD / YYYY 03 / 16 / 2015
Mailing Address 6917 BAL LAKE DR		Transaction ID : SA11AI.194481
City FORT WORTH	State TX	
Zip Code 76116		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C	Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00	

Full Name (Last, First, Middle Initial) SAM WEAVER		Date of Receipt MM / DD / YYYY 01 / 13 / 2015
Mailing Address 309 FISHERMAN TRL		Transaction ID : SA11AI.187664
City MELISSA	State TX	
Zip Code 75454		Amount of Each Receipt this Period 210.00
FEC ID number of contributing federal political committee. C	Name of Employer NONE	Occupation RETIRED
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 6314 S 30TH WEST AVE

City TULSA State OK Zip Code 74132

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2015

Transaction ID : SA11AI.195691

Amount of Each Receipt this Period
50.00

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

Mailing Address 6314 S 30TH WEST AVE

City TULSA State OK Zip Code 74132

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11AI.195993

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD E. WESTLING

Mailing Address 923 5TH ST APT 1

City HAWLEY State MN Zip Code 56549

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2015

Transaction ID : SA11AI.187784

Amount of Each Receipt this Period
350.00

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 102 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MR. DONALD E. WESTLING

Mailing Address 923 5TH ST APT 1

City HAWLEY State MN Zip Code 56549

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **680.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11AI.188888

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
MR. DONALD E. WESTLING

Mailing Address 923 5TH ST APT 1

City HAWLEY State MN Zip Code 56549

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **780.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : SA11AI.193268

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD E. WESTLING

Mailing Address 923 5TH ST APT 1

City HAWLEY State MN Zip Code 56549

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **880.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11AI.195061

Amount of Each Receipt this Period
100.00

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

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

230.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) WALTER WILD		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 04 / 2015	
Mailing Address 41-473 KALANIANAOLE HWY.		Transaction ID : SA11AI.196559	
City WAIMANALO	State HI	Zip Code 96795	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) WALTER WILD		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 21 / 2015	
Mailing Address 41-473 KALANIANAOLE HWY.		Transaction ID : SA11AI.197034	
City WAIMANALO	State HI	Zip Code 96795	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00		

Full Name (Last, First, Middle Initial) JOHN WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2015	
Mailing Address 5300 EAGLESTON BLVD		Transaction ID : SA11AI.192171	
City WESLEY CHAPEL	State FL	Zip Code 33544	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer WAG	Occupation EXECUTIVE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 2197 SUTTER VIEW LN

City LINCOLN State CA Zip Code 95648

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2015

Transaction ID : SA11AI.196995

Amount of Each Receipt this Period
100.00

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

Mailing Address N2185 BUTTERNUT RD

City WAUPACA State WI Zip Code 54981

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 16 / 2015

Transaction ID : SA11AI.187999

Amount of Each Receipt this Period
210.00

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

Mailing Address 3108 CAMINO DE LA SIERRA

City ALBUQUERQUE State NM Zip Code 87111

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

Name of Employer LZ TECHNOLOGY Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11AI.194697

Amount of Each Receipt this Period
70.00

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

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

380.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 3108 CAMINO DE LA SIERRA

City State Zip Code
ALBUQUERQUE NM 87111

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

Name of Employer Occupation
LZ TECHNOLOGY ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2015

Transaction ID : SA11AI.196894

Amount of Each Receipt this Period
50.00

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

Mailing Address PO BOX 268

City State Zip Code
TYLER TX 75710

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11AI.189887

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS B ANN WOODALL

Mailing Address PO BOX 216

City State Zip Code
LAUGHLINTOWN PA 15655

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11AI.192721

Amount of Each Receipt this Period
100.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 165
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **7 HAXTON PL**

City **SALT LAKE CITY** State **UT** Zip Code **84102**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 21 / 2015

Transaction ID : SA11AI.188764

Amount of Each Receipt this Period
1000.00

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

Mailing Address **5807 FALLING BROOK DR**

City **MASON** State **OH** Zip Code **45040**

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

Name of Employer **HUMANA** Occupation **ACTUARY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : SA11AI.191298

Amount of Each Receipt this Period
250.00

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

Mailing Address **100 HILTON AVE
UNIT M22**

City **GARDEN CITY** State **NY** Zip Code **11530**

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

Name of Employer **KELLENBERG MEMORIAL HS** Occupation **TEACHER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : SA11AI.192139

Amount of Each Receipt this Period
100.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 107 OF 165
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address **100 HILTON AVE
UNIT M22**

City **GARDEN CITY** State **NY** Zip Code **11530**

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

Name of Employer **KELLENBERG MEMORIAL HS** Occupation **TEACHER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
03 / 05 / 2015

Transaction ID : SA11Al.196966

Amount of Each Receipt this Period
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

100.00

104508.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Mailing Address 309 EAST PACES FERRY ROAD, N.E.

City ATLANTA State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C** C00459933

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195491

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195496

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1300 I STREET, NW
SUITE 700 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11C.191811

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

Mailing Address 919 18TH STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195493

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)

Mailing Address 1828 L ST NW
SUITE 705

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195490

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN RESORT DEVELOPMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ARDA-PAC)

Mailing Address 1201 15TH STREET NW 4TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00129932

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195563

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 110 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
ASSURANT INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 WEST MICHIGAN STREET

City State Zip Code
MILWAUKEE WI 53203

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195501

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE
ATTN: 19050-1204

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195504

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE
ATTN: 19050-1204

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195505

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2015

Transaction ID : SA11C.195542

Amount of Each Receipt this Period
 _____ 2500.00

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City	State	Zip Code
PHILADELPHIA	PA	19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2015

Transaction ID : SA11C.195550

Amount of Each Receipt this Period
 _____ 1000.00

Full Name (Last, First, Middle Initial)
DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 365

City	State	Zip Code
WASHINGTON	DC	20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2015

Transaction ID : SA11C.195549

Amount of Each Receipt this Period
 _____ 1000.00

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

_____ 4500.00

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

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

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

FOR LINE NUMBER: PAGE 112 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

Mailing Address 228 S. WASHINGTON ST.
STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.191809

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.191807

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURAN

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C** C00135681

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195539

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) FINANCIAL SERVICES INSTITUTE PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 607 14TH ST NW SUITE 750		Transaction ID : SA11C.195556	
City WASHINGTON State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00409714	Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) FINANCIAL SERVICES ROUNDTABLE PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 04 / 2015	
Mailing Address 1001 PENNSYLVANIA AVENUE, NW SUITE 500 SOUTH		Transaction ID : SA11C.191808	
City WASHINGTON State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00193177	Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 2941 FAIRVIEW PARK DR. SUITE 100		Transaction ID : SA11C.195547	
City FALLS CHURCH State VA Zip Code 22042	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00078451	Name of Employer Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11C.194140

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11C.191806

Amount of Each Receipt this Period
1917.92

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195548

Amount of Each Receipt this Period
1000.00

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

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

4917.92

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

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

FOR LINE NUMBER: PAGE 115 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (IN

A. Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195554

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

B. Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2015

Transaction ID : SA11C.193612

Amount of Each Receipt this Period
 2000.00

Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

C. Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2015

Transaction ID : SA11C.193613

Amount of Each Receipt this Period
 2500.00

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 116 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195508

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195509

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195495

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 BERKELEY STREET

City State Zip Code
BOSTON MA 02117

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195497

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 BERKELEY STREET

City State Zip Code
BOSTON MA 02117

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195498

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.196087

Amount of Each Receipt this Period
5000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 118 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City State Zip Code
SPRINGFIELD MA 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195499

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MERIT MEDICAL SYSTEMS INC EMPLOYEE GOOD GOVERNANCE PAC

Mailing Address 1600 MERIT PARKWAY

City State Zip Code
SOUTH JORDAN UT 84095

FEC ID number of contributing federal political committee. **C** C00475343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.196086

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1919 M STREET, NW
5TH FLOOR

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195561

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 400

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195502

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195543

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195546

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 540

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195503

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195544

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN PAC)

Mailing Address 1666 K STREET, NW
SUITE 500

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00473652**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195488

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 121 OF 165
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

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

Mailing Address 1301 K STREET, NW
SUITE 800W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11C.191741

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1301 K STREET, NW
SUITE 800W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SA11C.194138

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION, INC.

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195492

Amount of Each Receipt this Period
5000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 122 OF 165
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address **801 PENNSYLVANIA AVENUE**
SUITE 720

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195500

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **1015 15TH STREET NW**
SUITE 920

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11C.191739

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **1015 15TH STREET NW**
SUITE 920

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11C.191740

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address 1220 L ST. NW
STE. 100-263

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11C.191802

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
RIGHT TO RISE PAC

Mailing Address PO BOX 14349

City TALLAHASSEE State FL Zip Code 32317

FEC ID number of contributing federal political committee. **C C00571380**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11C.191803

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
RIGHT TO RISE PAC

Mailing Address PO BOX 14349

City TALLAHASSEE State FL Zip Code 32317

FEC ID number of contributing federal political committee. **C C00571380**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11C.191804

Amount of Each Receipt this Period
 2600.00

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
ROAD TO FREEDOM POLITICAL ACTION COMMITTEE

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00486043

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195540

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
ROAD TO FREEDOM POLITICAL ACTION COMMITTEE

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00486043

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195541

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
ROYCE CAMPAIGN COMMITTEE

Mailing Address PO BOX 3249

City State Zip Code
FULLERTON CA 92834

FEC ID number of contributing federal political committee. **C** C00200865

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195552

Amount of Each Receipt this Period
2000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
ROYCE CAMPAIGN COMMITTEE

Mailing Address **PO BOX 3249**

City **FULLERTON** State **CA** Zip Code **92834**

FEC ID number of contributing federal political committee. **C C00200865**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195553

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address **PO BOX 23219**

City **JEFFERSON** State **LA** Zip Code **70183**

FEC ID number of contributing federal political committee. **C C00394957**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195555

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,**

City **BLOOMINGTON** State **IL** Zip Code **61710**

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11C.193614

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
TEXAS CAPITAL BANK NA, POLITICAL ACTION COMMITTEE (TCB PAC)

Mailing Address 2000 MCKINNEY
SUITE 700

City DALLAS State TX Zip Code 75201

FEC ID number of contributing federal political committee. **C** C00496745

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.195494

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195562

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2015

Transaction ID : SA11C.193611

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address **PO BOX 2485**

City **SPRINGFIELD** State **VA** Zip Code **22152**

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11C.195551

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address **320 1ST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195506

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
TREY GOWDY FOR CONGRESS

Mailing Address **PO BOX 3324**

City **SPARTANBURG** State **SC** Zip Code **29304**

FEC ID number of contributing federal political committee. **C C00462523**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.191805

Amount of Each Receipt this Period

2000.00

PERMISSIBLE FUNDS

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

TOTAL This Period (last page this line number only).....

12000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 950 F STREET NW
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00488882**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.191812

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Mailing Address 1200 W 49TH ST.

City HIALEAH State FL Zip Code 33012

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.191810

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 BREN ROAD EAST

City MINNETONKA State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.195489

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.195545

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)

Mailing Address SIXTH AND MARQUETTE
MAC N9305-084

City Minneapolis State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11C.194141

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
ZIONS BANCORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 180 NORTH UNIVERSITY AVE
STE 300

City Provo State UT Zip Code 84601

FEC ID number of contributing federal political committee. **C** C00275230

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : SA11C.194139

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

128117.92

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9211.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 03 / 2015

Transaction ID : SA15.191098

Amount of Each Receipt this Period
3447.37

LRI- USUAL AND NORMAL

B. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13448.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA15.191752

Amount of Each Receipt this Period
4236.76

LRI- USUAL AND NORMAL

C. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13824.75

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA15.191790

Amount of Each Receipt this Period
376.65

LRI- USUAL AND NORMAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8060.78

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 165
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13955.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA15.195507

Amount of Each Receipt this Period
130.50

LRI- USUAL AND NORMAL

B. Full Name (Last, First, Middle Initial)
CAPITOL HILL LISTS

Mailing Address 1252 RAMBLING RILL CIRCLE

City State Zip Code
STATHAM GA 30666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12787.71

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA15.193615

Amount of Each Receipt this Period
368.00

LRI- USUAL AND NORMAL

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

498.50

8559.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. AMERICA DIRECT		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 1272 CORPORATE PARK DRIVE SECOND FLOOR		Amount of Each Disbursement this Period 16591.00 Transaction ID : SB17.187126
City FOREST State VA Zip Code 24551	Purpose of Disbursement PRINTING AND PRODUCTION Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) B. AMERICA DIRECT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1272 CORPORATE PARK DRIVE SECOND FLOOR		Amount of Each Disbursement this Period 14562.25 Transaction ID : SB17.191759
City FOREST State VA Zip Code 24551	Purpose of Disbursement PRINTING AND PRODUCTION Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) C. AMERICA DIRECT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1272 CORPORATE PARK DRIVE SECOND FLOOR		Amount of Each Disbursement this Period 13204.21 Transaction ID : SB17.191761
City FOREST State VA Zip Code 24551	Purpose of Disbursement PRINTING AND PRODUCTION Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	44357.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.189469
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 24.10 Transaction ID : SB17.191813
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.191817
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 94.29 Transaction ID : SB17.195569
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.195572
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address PO BOX 360001		Amount of Each Disbursement this Period 139.69 Transaction ID : SB17.195573
City FORT LAUDERDALE	State FL	
Zip Code 33336	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	241.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. BLUE MARKETING INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2015	
Mailing Address 32 WEST 200 SOUTH #312			Amount of Each Disbursement this Period 3000.00	
City SALT LAKE CITY	State UT	Zip Code 84101	Transaction ID : SB17.190586	
Purpose of Disbursement OFFICE RENT		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015	
Mailing Address 117 NORTH SAINT ASAPH STREET			Amount of Each Disbursement this Period 5652.29	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.187410	
Purpose of Disbursement MARKETING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015	
Mailing Address 117 NORTH SAINT ASAPH STREET			Amount of Each Disbursement this Period 2189.75	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.190585	
Purpose of Disbursement MARKETING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	10842.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 3708.82 Transaction ID : SB17.191610
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement E-MARKETING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2015
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 1593.28 Transaction ID : SB17.191818
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement MARKETING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 2896.94 Transaction ID : SB17.191771
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement MARKETING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8199.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 6814.52 Transaction ID : SB17.196085
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement MARKETING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 300 1ST STREET SE		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.190558
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL LISTS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1252 RAMBLING RILL CIRCLE		Amount of Each Disbursement this Period 7818.90 Transaction ID : SB17.191762
City STATHAM State GA Zip Code 30666	Purpose of Disbursement LIST RENTAL Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	15033.42
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. DIRECT MAIL PROCESSORS		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 1150 CONRAD COURT		Amount of Each Disbursement this Period 11087.34 Transaction ID : SB17.187125
City HAGERSTOWN State MD Zip Code 21740	Purpose of Disbursement DIRECT MAIL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DIRECT MAIL PROCESSORS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1150 CONRAD COURT		Amount of Each Disbursement this Period 1984.69 Transaction ID : SB17.191760
City HAGERSTOWN State MD Zip Code 21740	Purpose of Disbursement CAGING AND ESCROW 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELECTEK USA		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 1800.00 Transaction ID : SB17.187260
City CHARGRIN FALLS State OH Zip Code 44023	Purpose of Disbursement DATABASE SOFTWARE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14872.03
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. ELECTEK USA		Date of Disbursement MM / DD / YYYY 02 / 18 / 2015
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.191611
City CHARGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ELECTEK USA		Date of Disbursement MM / DD / YYYY 03 / 13 / 2015
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.194127
City CHARGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement COMPLIANCE SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ALISIA ESSIG		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address 3111 S. HILL ST.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.187131
City ARLINGTON	State VA	
Zip Code 22202	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FIRST DATA		M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 5565 GLENRIDGE CONNECTOR, NE		Amount of Each Disbursement this Period 238.83
City ATLANTA	State GA Zip Code 30342	
Purpose of Disbursement BANK FEES	Category/Type 001	Transaction ID : SB17.189466
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FIRST DATA		M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 5565 GLENRIDGE CONNECTOR, NE		Amount of Each Disbursement this Period 274.92
City ATLANTA	State GA Zip Code 30342	
Purpose of Disbursement CC TRANSACTION FEES	Category/Type 001	Transaction ID : SB17.191814
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FIRST DATA		M M / D D / Y Y Y Y 02 / 10 / 2015
Mailing Address 5565 GLENRIDGE CONNECTOR, NE		Amount of Each Disbursement this Period 35.00
City ATLANTA	State GA Zip Code 30342	
Purpose of Disbursement CC TRANSACTION FEES	Category/Type 001	Transaction ID : SB17.191815
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	548.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

A. FIRST DATA

Full Name (Last, First, Middle Initial)
Mailing Address 5565 GLENRIDGE CONNECTOR, NE

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 03 / 2015

Amount of Each Disbursement this Period
233.91

Transaction ID : SB17.195570

Category/Type: 001

B. DAVE HANSEN

Full Name (Last, First, Middle Initial)
Mailing Address 14697 SOUTH 2200 WEST

City BLUFFDALE State UT Zip Code 84065

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 31 / 2015

Amount of Each Disbursement this Period
5000.00

Transaction ID : SB17.189460

Category/Type: 001

C. DAVE HANSEN

Full Name (Last, First, Middle Initial)
Mailing Address 14697 SOUTH 2200 WEST

City BLUFFDALE State UT Zip Code 84065

Purpose of Disbursement
SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 27 / 2015

Amount of Each Disbursement this Period
5000.00

Transaction ID : SB17.191754

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 10233.91

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. MIA LOVE		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 913 WEST GROUSE CIRCLE		Amount of Each Disbursement this Period 1193.40
City SARATOGA SPRINGS	State UT	
Zip Code 84045	Purpose of Disbursement SEE MEMO ENTRY	Transaction ID : SB17.187261
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address PO BOX 20706		Amount of Each Disbursement this Period 1193.40
City ATLANTA	State GA	
Zip Code 30320	Purpose of Disbursement AIRFARE	Transaction ID : SB17.187262
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MARRIOTT GROUP		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address PO BOX 980847		Amount of Each Disbursement this Period 5000.00
City PARK CITY	State UT	
Zip Code 84098	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.189461
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6193.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. MARRIOTT GROUP			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO BOX 980847			Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.191768
City PARK CITY	State UT	Zip Code 84098	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. MDI IMAGING & MAIL			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 21955 CASCADES PARKWAY			Amount of Each Disbursement this Period 13057.56 Transaction ID : SB17.187127
City DULLES	State VA	Zip Code 20166	
Purpose of Disbursement POSTAGE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 2470 DANIELL'S BRIDGE RD. STE. 121			Amount of Each Disbursement this Period 2595.31 Transaction ID : SB17.187263
City ATHENS	State GA	Zip Code 30606	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	20652.87
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 2470 DANIELL'S BRIDGE RD. STE. 121		Amount of Each Disbursement this Period 2102.24 Transaction ID : SB17.190557
City ATHENS State GA Zip Code 30606	Purpose of Disbursement COMPLIANCE CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 2470 DANIELL'S BRIDGE RD. STE. 121		Amount of Each Disbursement this Period 2580.72 Transaction ID : SB17.191772
City ATHENS State GA Zip Code 30606	Purpose of Disbursement COMPLIANCE CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. RESPONSE AMERICA		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 211 N. UNION STREET STE. 200		Amount of Each Disbursement this Period 13056.60 Transaction ID : SB17.191763
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement DIRECT MAIL CREATIVE FEES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	17739.56
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. SALT LAKE COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address P.O. BOX 719		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.191773
City SALT LAKE CITY	State UT Zip Code 84110	
Purpose of Disbursement EVENT SPONSORSHIP	001	Category/ Type
Candidate Name SALT LAKE COUNTY REPUBLICAN PARTY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. SOUTHWEST PUBLISHING		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 2600 NW TOPEKA BLVD		Amount of Each Disbursement this Period 20523.46 Transaction ID : SB17.188436
City TOPEKA	State KS Zip Code 66617	
Purpose of Disbursement POSTAGE	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. SOUTHWEST PUBLISHING		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 2600 NW TOPEKA BLVD		Amount of Each Disbursement this Period 32357.83 Transaction ID : SB17.194128
City TOPEKA	State KS Zip Code 66617	
Purpose of Disbursement POSTAGE	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	56381.29
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. SOUTHWEST PUBLISHING		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 2600 NW TOPEKA BLVD		Amount of Each Disbursement this Period 6441.92
City TOPEKA State KS Zip Code 66617	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.194462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. ELIZABETH THOMAS		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 160 SOUTH 100 EAST		Amount of Each Disbursement this Period 500.00
City AMERICAN FORK State UT Zip Code 84003	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name		Transaction ID : SB17.186090
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. ELIZABETH THOMAS		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 160 SOUTH 100 EAST		Amount of Each Disbursement this Period 500.00
City AMERICAN FORK State UT Zip Code 84003	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name		Transaction ID : SB17.187411
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	7441.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. ELIZABETH THOMAS			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015	
Mailing Address 160 SOUTH 100 EAST			Amount of Each Disbursement this Period 500.00	
City AMERICAN FORK	State UT	Zip Code 84003	Transaction ID : SB17.189470	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ELIZABETH THOMAS			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015	
Mailing Address 160 SOUTH 100 EAST			Amount of Each Disbursement this Period 500.00	
City AMERICAN FORK	State UT	Zip Code 84003	Transaction ID : SB17.191755	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ELIZABETH THOMAS			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015	
Mailing Address 160 SOUTH 100 EAST			Amount of Each Disbursement this Period 500.00	
City AMERICAN FORK	State UT	Zip Code 84003	Transaction ID : SB17.191820	
Purpose of Disbursement SALARY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. ELIZABETH THOMAS		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address 160 SOUTH 100 EAST		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.194142
City AMERICAN FORK	State UT	
Zip Code 84003	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UNITED BANK		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address 1219 MOUNT AETNA ROAD		Amount of Each Disbursement this Period 98.12 Transaction ID : SB17.189467
City HAGERSTOWN	State MD	
Zip Code 21742	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UNITED BANK		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 1219 MOUNT AETNA ROAD		Amount of Each Disbursement this Period 108.04 Transaction ID : SB17.191816
City HAGERSTOWN	State MD	
Zip Code 21742	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	706.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. UNITED BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 1219 MOUNT AETNA ROAD		Amount of Each Disbursement this Period 77.32
City HAGERSTOWN State MD Zip Code 21742	Purpose of Disbursement BANK FEES 001 Category/Type	
Candidate Name		Transaction ID : SB17.195571
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 333 EAST MAIN STREET		Amount of Each Disbursement this Period 8169.77
City LEHI State MT Zip Code 84043	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.188435
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 333 EAST MAIN STREET		Amount of Each Disbursement this Period 3000.00
City LEHI State MT Zip Code 84043	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.191758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11247.09
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. UTAH COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 1175 N. 910 E.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.191774
City OREM	State UT	
Zip Code 84097	Purpose of Disbursement EVENT SPONSORSHIP	Category/ Type 001
Candidate Name UTAH COUNTY REPUBLICAN PARTY	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. VISUAL IMPACT DESIGN		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1252 RAMBLING RILL CIRCLE		Amount of Each Disbursement this Period 1550.00 Transaction ID : SB17.191764
City STATHAM	State GA	
Zip Code 30666	Purpose of Disbursement GRAPHIC DESIGN	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BRIAN VOEKS		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 7400 S. STATE ST. APT. 10101		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.191769
City MIDVALE	State UT	
Zip Code 84047	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. WELLS FARGO			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015	
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 16.37	
City RIVERTON	State UT	Zip Code 84065	Transaction ID : SB17.189464	
Purpose of Disbursement BANKS FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. WELLS FARGO			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015	
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 575.27	
City RIVERTON	State UT	Zip Code 84065	Transaction ID : SB17.187264	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY			Amount of Each Disbursement this Period 105.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB17.187265	
Purpose of Disbursement E-MARKETING		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	591.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. CREATIVE STREAM INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015	
Mailing Address 1428 N 2630 W			Amount of Each Disbursement this Period 140.00	
City PROVO	State UT	Zip Code 84601	Transaction ID : SB17.187267	
Purpose of Disbursement ADVERTISING		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. RED-E-STORAGE			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015	
Mailing Address 14740 HERITAGE CREST WAY			Amount of Each Disbursement this Period 135.00	
City BLUFFDALE	State UT	Zip Code 84065	Transaction ID : SB17.187268	
Purpose of Disbursement STORAGE UNIT RENTAL		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. WELLS FARGO			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015	
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 5265.57	
City RIVERTON	State UT	Zip Code 84065	Transaction ID : SB17.187270	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5265.57
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 153 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. APPLE STORE		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 1229 WISCONSIN AVE NW		Amount of Each Disbursement this Period 885.79
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement OFFICE EQUIPMENT Category/Type 001	
Candidate Name		Transaction ID : SB17.187271 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 12525 CINGULAR WAY		Amount of Each Disbursement this Period 30.00
City ALPHARETTA State GA Zip Code 30004	Purpose of Disbursement TELEPHONE Category/Type 001	
Candidate Name		Transaction ID : SB17.187272 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 1999 JEFFERSON DAVIS HWY		Amount of Each Disbursement this Period 616.91
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement LODGING Category/Type 001	
Candidate Name		Transaction ID : SB17.187275 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address PO BOX 20706		Amount of Each Disbursement this Period 3138.39
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement AIRFARE	Category/Type 001	Transaction ID : SB17.187276
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address 10501 S. REDWOOD RD		Amount of Each Disbursement this Period 34.25
City SOUTH JORDAN	State UT Zip Code 84095	
Purpose of Disbursement SHIPPING	Category/Type 001	Transaction ID : SB17.187277
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MAILCHIMP		Date of Disbursement MM / DD / YYYY 01 / 14 / 2015
Mailing Address 512 MEANS ST. STE. 404		Amount of Each Disbursement this Period 200.00
City ATLANTA	State GA Zip Code 30318	
Purpose of Disbursement EMAIL BLAST	Category/Type 001	Transaction ID : SB17.187278
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 20.00
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement BANK FEES Category/Type 001	
Candidate Name		Transaction ID : SB17.189463
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 6227.08
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement SEE MEMO ENTRIES Category/Type 001	
Candidate Name		Transaction ID : SB17.190559
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 12525 CINGULAR WAY		Amount of Each Disbursement this Period 30.00
City ALPHARETTA State GA Zip Code 30004	Purpose of Disbursement TELEPHONE Category/Type 001	
Candidate Name		Transaction ID : SB17.190561
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6247.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. BEST BUY		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 261 W 2100 S		Amount of Each Disbursement this Period 320.24
City SALT LAKE CITY	State UT	
Zip Code 84115	Purpose of Disbursement OFFICE EQUIPMENT	Transaction ID : SB17.190562
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 300 1ST STREET SE		Amount of Each Disbursement this Period 500.00
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT CATERING	Transaction ID : SB17.190564
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CONGRESSIONAL INSTITUTE		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 1700 DIAGONAL ROAD #730		Amount of Each Disbursement this Period 1456.00
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement MEMBERSHIP DUES	Transaction ID : SB17.190565
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address PO BOX 20706		Amount of Each Disbursement this Period 2918.00
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement AIRFARE	Category/Type 001	Transaction ID : SB17.190566 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 10501 S. REDWOOD RD		Amount of Each Disbursement this Period 304.44
City SOUTH JORDAN	State UT Zip Code 84095	
Purpose of Disbursement SHIPPING	Category/Type 001	Transaction ID : SB17.190567 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MAILCHIMP		Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 512 MEANS ST. STE. 404		Amount of Each Disbursement this Period 150.00
City ATLANTA	State GA Zip Code 30318	
Purpose of Disbursement EMAIL BLAST	Category/Type 001	Transaction ID : SB17.190568 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. THANKSGIVING POINT			Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 3003 THANKSGIVING WAY			Amount of Each Disbursement this Period 9117.83
City LEHI	State UT	Zip Code 84043	
Purpose of Disbursement MEETING EXENSE		Category/ Type 001	Transaction ID : SB17.190569 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO			Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 137.39
City RIVERTON	State UT	Zip Code 84065	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.190571 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO			Date of Disbursement MM / DD / YYYY 02 / 06 / 2015
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 9117.83
City RIVERTON	State UT	Zip Code 84065	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.190560
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	9117.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. DELTA		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address PO BOX 20706		Amount of Each Disbursement this Period 940.20
City ATLANTA State GA Zip Code 30320	Purpose of Disbursement AIRFARE 001 Category/Type	
Candidate Name		Transaction ID : SB17.190572 [MEMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) B. ABE'S TRANSPORTATION		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 2500 CALVERT STREET NW		Amount of Each Disbursement this Period 800.00
City WASHINGTON State DC Zip Code 20008	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		Transaction ID : SB17.190573 [MEMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) C. CHARLIE PALMER STEAKHOUSE		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 101 CONSTITUTION AVE NW		Amount of Each Disbursement this Period 5339.60
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement EVENT CATERING 001 Category/Type	
Candidate Name		Transaction ID : SB17.190575 [MEMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. CREATIVE STREAM INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 1428 N 2630 W		Amount of Each Disbursement this Period 140.00
City PROVO	State UT	
Zip Code 84601	Purpose of Disbursement ADVERTISING	Transaction ID : SB17.190576
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 901 6TH ST. NW		Amount of Each Disbursement this Period 1088.24
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement LODGING	Transaction ID : SB17.190577
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 105.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE ADVERTISING	Transaction ID : SB17.190579
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial)

A. RED-E-STORAGE

Mailing Address 14740 HERITAGE CREST WAY

City BLUFFDALE State UT Zip Code 84065

Purpose of Disbursement STORAGE FACILITY RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 06 / 2015

Amount of Each Disbursement this Period: 135.00

Transaction ID : SB17.190581

[MEMO ITEM]

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. WELLS FARGO

Mailing Address 1750 WEST 12600 SOUTH

City RIVERTON State UT Zip Code 84065

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 06 / 2015

Amount of Each Disbursement this Period: 100.14

Transaction ID : SB17.190582

[MEMO ITEM]

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. WELLS FARGO

Mailing Address 1750 WEST 12600 SOUTH

City RIVERTON State UT Zip Code 84065

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2015

Amount of Each Disbursement this Period: 23.53

Transaction ID : SB17.191753

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 23.53

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.191767
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement BANK FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 736.18 Transaction ID : SB17.191775
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 300 1ST STREET SE		Amount of Each Disbursement this Period 97.50 Transaction ID : SB17.191777 [MEMO ITEM]
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	756.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 165			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. MAILCHIMP		Date of Disbursement MM / DD / YYYY 03 / 04 / 2015
Mailing Address 512 MEANS ST. STE. 404		Amount of Each Disbursement this Period 150.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement EMAIL BLAST	
Candidate Name	Category/Type 001	Transaction ID : SB17.191779 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement MM / DD / YYYY 03 / 04 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 473.02
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement SEE MEMO ENTRIES	
Candidate Name	Category/Type 001	Transaction ID : SB17.191782 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RED-E-STORAGE		Date of Disbursement MM / DD / YYYY 03 / 04 / 2015
Mailing Address 14740 HERITAGE CREST WAY		Amount of Each Disbursement this Period 135.00
City BLUFFDALE State UT Zip Code 84065	Purpose of Disbursement STORAGE FACILITY RENTAL	
Candidate Name	Category/Type 001	Transaction ID : SB17.191784 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	473.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 165			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. CREATIVE STREAM INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015		
Mailing Address 1428 N 2630 W			Amount of Each Disbursement this Period 140.00		
City PROVO	State UT	Zip Code 84601	Transaction ID : SB17.191785		
Purpose of Disbursement ADVERTISING		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015		
Mailing Address 1600 AMPITHEATRE PARKWAY			Amount of Each Disbursement this Period 105.00		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB17.191786		
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. WELLS FARGO			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015		
Mailing Address 1750 WEST 12600 SOUTH			Amount of Each Disbursement this Period 37.91		
City RIVERTON	State UT	Zip Code 84065	Transaction ID : SB17.196088		
Purpose of Disbursement BANK FEES		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Disbursements This Page (optional).....	37.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 165	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 1750 WEST 12600 SOUTH		Amount of Each Disbursement this Period 20.00
City RIVERTON State UT Zip Code 84065	Purpose of Disbursement BANK FEES Category/Type 001	
Candidate Name		Transaction ID : SB17.195519
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. WIN RIGHT DATA		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1252 RAMBLING RILL CIR		Amount of Each Disbursement this Period 2377.97
City STATHAM State GA Zip Code 30666	Purpose of Disbursement DATA WORK Category/Type 001	
Candidate Name		Transaction ID : SB17.191765
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		Transaction ID
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2397.97
TOTAL This Period (last page this line number only).....	258491.60