

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

RESTORE THE CONSTITUTION COALITION

ADDRESS (number and street) 1624 MARKET STREET
SUITE 202
Check if different than previously reported. (ACC) DENVER CO 80202

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

C C00584482

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

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

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

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

5. Covering Period [MM] / [DD] / [YYYY] 08 / 22 / 2015 through [MM] / [DD] / [YYYY] 12 / 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 alexander hornaday

Signature of Treasurer alexander hornaday [Electronically Filed] Date 01 / 31 / 2016

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

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

RESTORE THE CONSTITUTION COALITION

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12115.00"/>	<input type="text" value="12115.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12115.00"/>	<input type="text" value="12115.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9500.00"/>	<input type="text" value="9500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2615.00"/>	<input type="text" value="2615.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

RESTORE THE CONSTITUTION COALITION

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5500.00	5500.00
(ii) Unitemized	6615.00	6615.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12115.00	12115.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12115.00	12115.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12115.00	12115.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12115.00	12115.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9500.00	9500.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9500.00	9500.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9500.00	9500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9500.00	9500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12115.00	12115.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12115.00	12115.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9500.00	9500.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9500.00	9500.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)
A. Louis Albano

Mailing Address 9151 W Greenway Rd
#62

City Peoria State AZ Zip Code 85381

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
12 / 08 / 2015
Transaction ID : SA11AI.4311

Amount of Each Receipt this Period
250.00

CONTRIBUTOR

Full Name (Last, First, Middle Initial)
B. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 15 / 2015
Transaction ID : SA11AI.4467

Amount of Each Receipt this Period
500.00

In-kind - Paid legal Fees

Full Name (Last, First, Middle Initial)
C. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 15 / 2015
Transaction ID : SA11AI.4470

Amount of Each Receipt this Period
500.00

In-kind - Paid Legal Fees

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)
A. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
11 / 15 / 2015
Transaction ID : SA11AI.4471

Amount of Each Receipt this Period
500.00

In-kind - Paid Legal Fees

Full Name (Last, First, Middle Initial)
B. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
12 / 15 / 2015
Transaction ID : SA11AI.4472

Amount of Each Receipt this Period
500.00

In-kind - Paid Legal Fees

Full Name (Last, First, Middle Initial)
C. Matthew Bailey

Mailing Address 4915 S Range Rd

City North Judson State IN Zip Code 46366

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

Name of Employer Occupation
President NER Constrction Management

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 08 / 2015
Transaction ID : SA11AI.4308

Amount of Each Receipt this Period
250.00

CONTRIBUTON

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)
A. Robert Boersma

Mailing Address 1098 Mariposa Dr NE

City State Zip Code
Palm Bay FL 32905

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

Name of Employer Occupation
Programmer N/A

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /
 12 / 15 / 2015
Transaction ID : SA11AI.4385

Amount of Each Receipt this Period
500.00

CONTRIBUTOR

Full Name (Last, First, Middle Initial)
B. Dee Canale

Mailing Address 180 Azalea Garden Way

City State Zip Code
Memphis TN 38111

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

Name of Employer Occupation
CPA Mueller Prost L C

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 / /
 12 / 03 / 2015
Transaction ID : SA11AI.4247

Amount of Each Receipt this Period
250.00

CONTRIBUTOR

Full Name (Last, First, Middle Initial)
C. Joan H Facey

Mailing Address 174 Earhart Ln

City State Zip Code
Clayton GA 30525

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

Name of Employer Occupation
Retired corporate manager UPS

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 / /
 12 / 14 / 2015
Transaction ID : SA11AI.4372

Amount of Each Receipt this Period
250.00

CONTRIBUTOR

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

A. Eddie Fontenot , CRNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3835 cr 4560
 City Winnsboro State TX Zip Code 75494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Business Owner Occupation Baileys Discount Center
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2015
Transaction ID : SA11AI.4310
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTOR

B. William Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 2517 Crown Ct
 City Panama City State FL Zip Code 32405-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Restaurant Occupation Sonny's Famous Steak Hogies
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2015
Transaction ID : SA11AI.4263
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTOR

C. Donald North
 Full Name (Last, First, Middle Initial)
 Mailing Address 23515 E Piccolo Dr
 City Aurora State CO Zip Code 80016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer disabled Occupation none
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTOR

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)
A. Ogale (Randy) Ray

Mailing Address 3481 rockcliff Pl

City Longwood	State FL	Zip Code 32779
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FEC ID number of contributing federal political committee. **C**

Name of Employer CEO	Occupation MarketQ, Inc.
-------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period
1000.00

CONTRIBUTOR

Full Name (Last, First, Middle Initial)
B. David Whilden

Mailing Address PO Box 15182

City San Diego	State CA	Zip Code 92175
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FEC ID number of contributing federal political committee. **C**

Name of Employer Contractor	Occupation Gulfcoast Utility
--------------------------------	---------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period
250.00

CONTRIBUTOR

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	5500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)

A. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

Purpose of Disbursement In-kind - Paid legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 15 / 2015

Transaction ID : **SB21B.4469**

Amount of Each Disbursement this Period: 500.00

Category/Type

Full Name (Last, First, Middle Initial)

B. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

Purpose of Disbursement In-kind - Paid Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 15 / 2015

Transaction ID : **SB21B.4475**

Amount of Each Disbursement this Period: 500.00

Category/Type

Full Name (Last, First, Middle Initial)

C. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

Purpose of Disbursement In-kind - Paid Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 15 / 2015

Transaction ID : **SB21B.4474**

Amount of Each Disbursement this Period: 500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE THE CONSTITUTION COALITION

Full Name (Last, First, Middle Initial)

A. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

Purpose of Disbursement
In-kind - Paid Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2015

Transaction ID : SB21B.4473

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Amagi Strategies

Mailing Address 424 E. 10th Street
3D

City New York State NY Zip Code 20009

Purpose of Disbursement
Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SB21B.4476

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

8000.00

9500.00