

# 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

ANN PAC

ADDRESS (number and street) P.O. Box 3535

Check if different than previously reported. (ACC) Ballwin MO 63022

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

C C00531764 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)

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

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

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

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

Election on 11 / 08 / 2016 in the State of MO

5. Covering Period 10 / 20 / 2016 through 11 / 28 / 2016

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 McSwain, Patrick, , ,

Signature of Treasurer McSwain, Patrick, , , [Electronically Filed] Date 12 / 05 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**ANN PAC**

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="2016"/>		76732.05
(b) Cash on Hand at Beginning of Reporting Period.....	22189.03	
(c) Total Receipts (from Line 19) .....	18500.00	127537.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	40689.03	204269.55
7. Total Disbursements (from Line 31).....	13368.08	176948.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27320.95	27320.95
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**ANN PAC**

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).....	0.00	17700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	17700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18500.00	109837.50
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18500.00	127537.50
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)).....▶	18500.00	127537.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	18500.00	127537.50

**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 .....	5868.08	107948.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5868.08	107948.60
22. Transfers to Affiliated/Other Party Committees.....	5000.00	20000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	49000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	13368.08	176948.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13368.08	176948.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18500.00	127537.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18500.00	127537.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5868.08	107948.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5868.08	107948.60

**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 6 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**ANN PAC**

**A. DELOITTE FEDERAL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 365

City WASHINGTON	State DC	Zip Code 20044-0365
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

**Transaction ID : SA11C.7204**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City WASHINGTON	State DC	Zip Code 20004-2414
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2016

**Transaction ID : SA11C.7208**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address ONE COMCAST CENTER  
1701 JFK BOULEVARD

City PHILADELPHIA	State PA	Zip Code 19103-2838
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2016

**Transaction ID : SA11C.7224**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> 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 type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**ANN PAC**

**A. EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS P**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address ONE EXPRESS WAY  
 City SAINT LOUIS State MO Zip Code 63121-1824  
 FEC ID number of contributing federal political committee. **C** C00365072  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2016  
**Transaction ID : SA11C.7225**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. NATIONAL ELECTRICAL CONTRACTORS ASSN PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 BETHESDA METRO CENTER SUITE 1100  
 City BETHESDA State MD Zip Code 20814-6302  
 FEC ID number of contributing federal political committee. **C** C00113811  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2016  
**Transaction ID : SA11C.7226**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. THOMPSON COBURN PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 US BANK PLAZA  
 City SAINT LOUIS State MO Zip Code 63101-1612  
 FEC ID number of contributing federal political committee. **C** C00550491  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 07 / 2016  
**Transaction ID : SA11C.7247**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**ANN PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2016
Mailing Address 701 PENNSYLVANIA AVENUE, NW SUITE 200		<b>Transaction ID : SA11C.7250</b>
City WASHINGTON	State DC	Zip Code 20004-3610
FEC ID number of contributing federal political committee. C C00274431		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	18500.00



**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**ANN PAC**

**A. US POST OFFICE**

Full Name (Last, First, Middle Initial)

Mailing Address 16105 SWINGLEY RIDGE RD

City CHESTERFIELD State MO Zip Code 63017-1733

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I5086

Amount of Each Disbursement this Period: 94.00

Memo Item

**B. CAPITAL ENHANCEMENT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 150 LONG RD STE 50

City CHESTERFIELD State MO Zip Code 63005-1239

Purpose of Disbursement ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I5113

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. GULA GRAHAM GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003-4027

Purpose of Disbursement FUNDRAISING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I5102

Amount of Each Disbursement this Period: 4945.63

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5539.63

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**ANN PAC**

Full Name (Last, First, Middle Initial)

**A. COMMERCE BANK CREDIT CARDS**

Mailing Address PO BOX 808009

City KANSAS CITY State MO Zip Code 64180-8009

Purpose of Disbursement  
CREDIT CARD PAYMENT

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 Y Y  
11 / 07 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.I5147**  
Amount of Each Disbursement this Period  
 78.45

Memo Item

Full Name (Last, First, Middle Initial)

**B. DUE SOUTH**

Mailing Address 301 WATER ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FOOD/BEVERAGE

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 Y Y  
09 / 13 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.I5148**  
Amount of Each Disbursement this Period  
 78.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. CRIMSON**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

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 Y Y  
11 / 09 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.I5149**  
Amount of Each Disbursement this Period  
 250.00

Memo Item

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

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

328.45  
 5868.08

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**ANN PAC**

**A. MISSOURI REPUBLICAN STATE COMMITTEE-FEDERAL**

Full Name (Last, First, Middle Initial)

Mailing Address 105 E HIGH STREET/P. O. BOX 73

City JEFFERSON CITY State MO Zip Code 65101

Purpose of Disbursement TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C C00008664

Transaction ID : SB22.I5090

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5000.00

**TOTAL** This Period (last page this line number only)..... ▶ 5000.00

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

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

NAME OF COMMITTEE (In Full)  
**ANN PAC**

**A. COMSTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 6822 WEMBERLY WAY

City MC LEAN State VA Zip Code 22101-1596

Purpose of Disbursement  
POLITICAL CONTRIBUTION: GENERAL 2016

Candidate Name  
**COMSTOCK, BARBARA, J, , HONORABLE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: VA District: 10

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C00554261  
Transaction ID : SB23.I5092  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. LIZ CHENEY FOR WYOMING**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 697

City CASPER State WY Zip Code 82602

Purpose of Disbursement  
POLITICAL CONTRIBUTION: GENERAL 2016

Candidate Name  
**CHENEY, ELIZABETH, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: WY District:

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C00607556  
Transaction ID : SB23.I5091  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. LIZ CHENEY FOR WYOMING**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 697

City CASPER State WY Zip Code 82602

Purpose of Disbursement  
POLITICAL CONTRIBUTION: PRIMARY 2016

Candidate Name  
**CHENEY, ELIZABETH, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: WY District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C00607556  
Transaction ID : SB23.I5103  
Amount of Each Disbursement this Period: -2500.00  
PRIMARY 2016

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00