



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**American Horizons 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"/>	<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="88197.91"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="750014.50"/>	<input type="text" value="1099972.50"/>
(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="838212.41"/>	<input type="text" value="1099972.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="821117.50"/>	<input type="text" value="1082877.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="17094.91"/>	<input type="text" value="17094.91"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**American Horizons 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).....	205534.00	276084.00
(ii) Unitemized .....	544480.50	823888.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	750014.50	1099972.50
(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) .....	750014.50	1099972.50
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)).....▶	750014.50	1099972.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	750014.50	1099972.50

**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 .....	792909.50	1049234.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	792909.50	1049234.59
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 (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 .....	28208.00	33643.00
(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)).....	28208.00	33643.00
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)) ..	821117.50	1082877.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	821117.50	1082877.59

**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) .....	750014.50	1099972.50
34. Total Contribution Refunds (from Line 28(d)) .....	28208.00	33643.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	721806.50	1066329.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	792909.50	1049234.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	792909.50	1049234.59

**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 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**American Horizons PAC**

**A. A, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7861 BRINT ROAD  
 City SYLVANIA State OH Zip Code 43560-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOMEMAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2016  
**Transaction ID : SA11AI.16255**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. A., STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43465 INTERLAKEN DRIVE  
 City STERLING HEIGHTS State MI Zip Code 48313-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US ARMY Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2016  
**Transaction ID : SA11AI.18536**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. AASMUNDSTAD, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 110 PALMER ROAD  
 City DEVILS LAKE State ND Zip Code 58301-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER/SMALL BUSINESS  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.6879**  
 Amount of Each Receipt this Period  
 350.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2380.00
<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 258
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ADAMS, HENRY, , ,**

Mailing Address **985 BRYAN LANE**

City <b>LUMBERTON</b>	State <b>TX</b>	Zip Code <b>77657-0000</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>ENVIROMENTAL</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 30 / 2016**

**Transaction ID : SA11AI.27374**

Amount of Each Receipt this Period  
**265.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ADDISON, COREY, , ,**

Mailing Address **10206 ELM AVENUE**

City <b>FONTANA</b>	State <b>CA</b>	Zip Code <b>92335-0000</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>ADDISON EQUIPMENT RENTAL</b>	Occupation (for Individual) <b>PRESIDENT</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**515.00**

Date of Receipt  
**07 / 26 / 2016**

**Transaction ID : SA11AI.24003**

Amount of Each Receipt this Period  
**515.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. AGUILAR, VERONICA, , ,**

Mailing Address **3591 PRINCETON AVENUE**

City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92117-0000</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>ATTORNEY</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**515.00**

Date of Receipt  
**08 / 27 / 2016**

**Transaction ID : SA11AI.31752**

Amount of Each Receipt this Period  
**515.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1295.00</b>
<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:	PAGE 8 OF 258
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. ALLEN, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 CAROLINA AVE  
 City CHAPEL HILL State NC Zip Code 27514-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUNRISE BISCUIT KITCHEN INC Occupation (for Individual) RESTAURANT OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.18815**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. ALLEN, JANET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21416 E OTTAWA CIR  
 City AURORA State CO Zip Code 80016-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PAYTECH Occupation (for Individual) CEO/OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.20001**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. ALLEN, JODI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 W GARDEN ST  
 City PENSACOLA State FL Zip Code 32502-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) JEWELER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6304**  
 Amount of Each Receipt this Period  
 415.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1445.00
<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 9 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. ALLENBRAND, SHIRLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2010 W.93RD STREET  
 City LENEKA State KS Zip Code 66220-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) DESIGNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2016  
**Transaction ID : SA11AI.30717**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. ANDERSON, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 MAYO COURT  
 City FORT THOMAS State KY Zip Code 41075-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OMEGA PROCESSING SOLUTIONS Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24472**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. ANGERMAN, NADRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 119 POTTER ROAD  
 City KETCHIKAN State AK Zip Code 99901-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ADVERTISING / MARKETING / PR / FI  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14403**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1715.00
<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 10 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ANTIC, DEJAN, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 19 / 2016 <b>Transaction ID : SA11AI.5880</b>		
Mailing Address 329 PARISH DR			Amount of Each Receipt this Period 300.00		
City WAYNE	State NJ	Zip Code 07470-0000	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) GSC SERVICES CORP		Occupation (for Individual) ENVIRNMENTAL CONTRACTING			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ASHLEY, MARY, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 01 / 2016 <b>Transaction ID : SA11AI.27982</b>		
Mailing Address 2860 STATE ROAD 13			Amount of Each Receipt this Period 1000.00		
City SAINT JOHNS	State FL	Zip Code 32259-0000	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) TRAVEL CONSULTANT			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ATKINSON, TIM, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 25 / 2016 <b>Transaction ID : SA11AI.23435</b>		
Mailing Address 7934 WEST DR. APT 1103			Amount of Each Receipt this Period 265.00		
City MIAMI BEACH	State FL	Zip Code 33141-0000	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) CEO			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1565.00
<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 11 OF 258
	<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)  
**American Horizons PAC**

**A. AVERBECK, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6001 CLARK RD  
 City HARRISON State TN Zip Code 37341-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIRNET Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23557**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. BABICKI, MARIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 ELLSWORTH  
 City ISELIN State NJ Zip Code 08830-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AFFLO SP.ZO.O Occupation (for Individual) M.D.  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2016  
**Transaction ID : SA11AI.30004**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. BAILEY, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 SETTING SUN TRAIL  
 City ELLINGTON State CT Zip Code 06029-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SPECIALTY PRINTING Occupation (for Individual) CEO/PRINCIPAL  
 Receipt For: 2016  
 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  
 08 / 06 / 2016  
**Transaction ID : SA11AI.30360**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3215.00
<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 12 OF 258
	<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)  
**American Horizons PAC**

**A. BAILEY, MONA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6200 LAKE WAY  
 City NORTH RICHLAND HILLS State TX Zip Code 76180-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 07 / 28 / 2016  
**Transaction ID : SA11AI.7111**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. BAKER, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10601 GRANT RD. STE. 217  
 City HOUSTON State TX Zip Code 77070-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11AI.29602**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. BALL, JOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3943 CRESTMONT AVENUE  
 City ERIE State PA Zip Code 16508-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VA MEDICAL CENTER Occupation (for Individual) SUPPLY TECH  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.4892**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1290.00
<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 13 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BANKSTON, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11717 STEVE CRESTWOOD TRAIL  
 City HARRISON State TN Zip Code 37341-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RICK'S LOCK & KEY Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2016  
**Transaction ID : SA11AI.17554**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. BARSTAD, MELANIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1857 POST OAK PLACE  
 City WESTLAKE State TX Zip Code 76262-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J&J Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.11563**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. BARTLETT, JANIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11202 SIERRA PASS PLACE  
 City CHATSWORTH State CA Zip Code 91311-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) HUMAN RESOURCES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.18324**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	795.00
<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 14 OF 258
	<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)  
**American Horizons PAC**

**A. BATSON, FRANK, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2517 LEBANON PIKE STE 101

City NASHVILLE	State TN	Zip Code 37214-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CHIROPRACTIC PHYSICIAN
---	---

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
07		26		2016

**Transaction ID : SA11AI.24189**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BATTAGLIA, JOYCE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 OLDTOWN RD

City ALBUQUERQUE	State NM	Zip Code 87104-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) ENTREPRENEUR
--	---

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
08		04		2016

**Transaction ID : SA11AI.28345**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. BEAM, LINDA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2340 FORD AVENUE

City OWENSBORO	State KY	Zip Code 42301-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) HOUSEWIFE
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

**Transaction ID : SA11AI.8445**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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:	PAGE 15 OF 258
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BEASLEY, MATTHEW, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16526 HIGHLAND AVE.

City MONTVERDE	State FL	Zip Code 34756-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WILO	Occupation (for Individual) DIRECTOR
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

**Transaction ID : SA11AI.7300**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. BEAUCHAMP, MIKE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 116

City BOVINA	State TX	Zip Code 79009-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMING AND RANCHING
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.30981**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. BEAVERS, ANTHONY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3407 FAIRLANE AVE

City ODESSA	State TX	Zip Code 79762-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) SHERMCO INDUSTRIES	Occupation (for Individual) SUPERVISING FIELD ENGINEER
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

**Transaction ID : SA11AI.23211**

Amount of Each Receipt this Period  
515.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2780.00
<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:	PAGE 16 OF 258
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BECK, JIM, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 26 / 2016
Mailing Address 15 WIDELoop RD			<b>Transaction ID : SA11AI.23070</b>
City ROLLING HILLS	State CA	Zip Code 90274-0000	Amount of Each Receipt this Period 515.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED		Occupation (for Individual) CEO	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BECK, STACY, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2016
Mailing Address 10 PRIEST LANE			<b>Transaction ID : SA11AI.19340</b>
City SEQUIM	State WA	Zip Code 98382-0000	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) JEFFERSON HEALTHCARE		Occupation (for Individual) NURSE	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BEDNARCZYK, STEVEN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2016
Mailing Address 4409 MARCUS URIBE			<b>Transaction ID : SA11AI.22060</b>
City EL PASO	State TX	Zip Code 79934-0000	Amount of Each Receipt this Period 265.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF		Occupation (for Individual) PHYSICIAN	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	980.00
<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 17 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BELCHER, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 COPELAND DRIVE  
 City ROCHESTER State NH Zip Code 03867-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) NETWORK ADMIN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.9008**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. BELLO, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6119 GROSVENOR SHORE DRIVE  
 City WINDERMERE State FL Zip Code 34786-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ENTREPRENEUR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2016  
**Transaction ID : SA11AI.29780**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. BELMONT, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15236 KITTRELL DR  
 City SPRING HILL State FL Zip Code 34610-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2016  
**Transaction ID : SA11AI.23163**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1545.00
<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 18 OF 258
	<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)  
**American Horizons PAC**

**A. BENFORADO, TERRI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3505 KNIGHTSHIRE DRIVE  
 City APEX State NC Zip Code 27539-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EXECUTIVE ACCOUNTING SERVICES Occupation (for Individual) OWNER  
 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  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14753**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. BENNETT, DARCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3116 CAMINO DEL MONTE  
 City CARMEL State CA Zip Code 93923-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) UNEMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.31663**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. BENNETT, DONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2071 NE 54TH STREET  
 City FORT LAUDERDALE State FL Zip Code 33308-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.8033**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1415.00
<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 19 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. Benoit, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 W Cherokee Ave  
 City Cartersville State GA Zip Code 30120-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Restaurateur  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2545.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.6349**  
 Amount of Each Receipt this Period  
 1530.00  
 Memo Item

**B. BERMAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 VAN BUREN ST  
 City HOLLYWOOD State FL Zip Code 33019-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AD 1 GLOBAL Occupation (for Individual) PRESIDENT  
 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  
 07 / 01 / 2016  
**Transaction ID : SA11AI.9152**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. BESAW, BART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 10  
 City LUXEMBURG State WI Zip Code 54217-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) B&M LOGISTICS INC Occupation (for Individual) OWNER/PRESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2016  
**Transaction ID : SA11AI.22128**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2045.00
<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 20 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BESS, JILL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 311 S CLAY

City MOUNT CARROLL	State IL	Zip Code 61053-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) BESS REALTY INC	Occupation (for Individual) MANAGING BROKER/OWNER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
07 / 08 / 2016  
Transaction ID : SA11AI.12424

Amount of Each Receipt this Period  
265.00

Memo Item

**B. BETH, MARY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 371

City PARK FALLS	State WI	Zip Code 54552-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) STUEBER'S BEVERAGES INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  
07 / 18 / 2016  
Transaction ID : SA11AI.18558

Amount of Each Receipt this Period  
515.00

Memo Item

**C. BEUKEMA, PETER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7550 RANSOM ST

City ZEELAND	State MI	Zip Code 49464-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) H. I. H. INC (DBA SUBURBAN INNS)	Occupation (for Individual) HOTEL/RESTAURANT MGT
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1015.00

Date of Receipt  
07 / 08 / 2016  
Transaction ID : SA11AI.12398

Amount of Each Receipt this Period  
1015.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1795.00
<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 21 OF 258
	<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)  
**American Horizons PAC**

**A. BITZER, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 365 FALLS POINT TRAIL  
 City ALPHARETTA State GA Zip Code 30022-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) WORK IN MY HOME  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.11210**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. BLAHA, STACI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15955 NW 130TH STREET  
 City PLATTE CITY State MO Zip Code 64079-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STACI R BLAHA DDS PC Occupation (for Individual) DENTIST  
 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  
 09 / 12 / 2016  
**Transaction ID : SA11AI.18472**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. BLAUER, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10203 LORIDAN LN  
 City SANDY State UT Zip Code 84092-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REPRODUCTIVE CARE CENTER Occupation (for Individual) PHYSICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2016  
**Transaction ID : SA11AI.9357**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1530.00
<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 22 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BLUM, KATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2003 TRAILPINE CT  
 City NORMAN State OK Zip Code 73072-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUM DENTAL CLINIC Occupation (for Individual) OFFICE MANAGER  
 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  
 07 / 21 / 2016  
**Transaction ID : SA11AI.19757**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. BLUM, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2003 TRAILPINE CT  
 City NORMAN State OK Zip Code 73072-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PILATES FITNESS CENTER Occupation (for Individual) PILATES INSTRUCTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 755.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2016  
**Transaction ID : SA11AI.19759**  
 Amount of Each Receipt this Period  
 755.00  
 Memo Item

**C. BOER, ADRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 472 S 200 W  
 City JEROME State ID Zip Code 83338-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) DAIRY/FARMER  
 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  
 08 / 23 / 2016  
**Transaction ID : SA11AI.23150**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2755.00
<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 23 OF 258
	<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)  
**American Horizons PAC**

**A. BOLLO, CAROL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8772 MACOMB

City GROSSE ILE	State MI	Zip Code 48138-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CAROL BOLLO AND ASSOC	Occupation (for Individual) REALTOR
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

**Transaction ID : SA11AI.5896**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. BONEZZI, PATRICIA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 662 HARBOR BLVD. UNIT 310

City DESTIN	State FL	Zip Code 32541-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) OKALOOSA COUNTY SCHOOL DISTRICT	Occupation (for Individual) DIRECTOR OF CAREER & TECHNICA
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.26515**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. BOONE, SHERRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4500 WINDSOR RIDGE

City IRVING	State TX	Zip Code 75038-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) VOLUNTEER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

**Transaction ID : SA11AI.26205**

Amount of Each Receipt this Period  
215.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<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 24 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BORCHARDT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1236 WEST TWAIN  
 City FRESNO State CA Zip Code 93711-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER  
 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  
 07 / 16 / 2016  
**Transaction ID : SA11AI.18122**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. BORGEN, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 429 E DUPONT RD #306  
 City FORT WAYNE State IN Zip Code 46825-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MANPOWER OF LANSING MICHIGAN INC. Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.13519**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. BOWDOIN, IRVIN FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5521 CLEARVIEW DR  
 City NORTH CHARLESTON State SC Zip Code 29420-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE READING WAREHOUSE Occupation (for Individual) BOOK SELLER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.31517**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1280.00
<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 25 OF 258
	<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)  
**American Horizons PAC**

**A. BOYD, DEBBY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 WINBOURNE DRIVE  
 City HATTIESBURG State MS Zip Code 39402-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ST LUKE HOME HEALTH SERVICES Occupation (for Individual) RN ADMINISTRATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.20635**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

**B. BOYD, DEBORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address POBOX 25070  
 City SAINT PAUL State MN Zip Code 55125-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HERBALIFE MEMBER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : SA11AI.15115**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. BRADY, ANTOINETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 SEVEN STAR RD  
 City GROVELAND State MA Zip Code 01834-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.8271**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1015.00
<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 26 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. BRAZIE, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14481 SE WYEAST  
 City DAMASCUS State OR Zip Code 97089-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12312**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. BROOKS, BOBBIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 FM 3372  
 City PALESTINE State TX Zip Code 75803-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL AND GAS INDUSTRY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.17281**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

**C. BROOKS, DR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4554 NORMANDY DRIVE  
 City GALENA State OH Zip Code 43021-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CHIROPRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.7436**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3665.00
<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 27 OF 258
	<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)  
**American Horizons PAC**

**A. BROWN, JUANITA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10008 SORREL CT

City FORT WORTH	State TX	Zip Code 76126-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CHILDRENS LIGHTHOUSE AT ALTA VISTA	Occupation (for Individual) SMALL BUSINESS OWNER
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2016

**Transaction ID : SA11AI.25450**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. BULAVCHIK, VADIM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5240 S UNIVERSITY DR #106-E

City FORT LAUDERDALE	State FL	Zip Code 33304-0000
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) GOURMET SEAFOOD WORLD	Occupation (for Individual) EXECUTIVE DIRECTOR
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1015.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2016

**Transaction ID : SA11AI.13865**

Amount of Each Receipt this Period  
1015.00

Memo Item

**C. BURDICK, DEBORAH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24829 S. POTAWATOMIE TRAIL

City CHANNAHON	State IL	Zip Code 60410-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MARS PET	Occupation (for Individual) SAP BUSINESS ANALYST
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
08 / 29 / 2016

**Transaction ID : SA11AI.6238**

Amount of Each Receipt this Period  
225.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1505.00
<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 28 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BURLESON, STEVEN, , ,**

Mailing Address **BOX 2479**

City <b>MIDLAND</b>	State <b>TX</b>	Zip Code <b>79702-0000</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>GEOLOGIST</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**515.00**

Date of Receipt  
**08 / 09 / 2016**

**Transaction ID : SA11AI.24287**

Amount of Each Receipt this Period  
**515.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BURT, JONATHAN, , ,**

Mailing Address **2898 BASIN HARBOR RD**

City <b>SHOREHAM</b>	State <b>VT</b>	Zip Code <b>05770-0000</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>ROBCO TRUCKING LLC</b>	Occupation (for Individual) <b>MILK HAULER</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**50.00**

Date of Receipt  
**07 / 21 / 2016**

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period  
**50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BUTLER, DWIGHT, , ,**

Mailing Address **3030 SEA MARSH RD**

City <b>FERNANDINA BEACH</b>	State <b>FL</b>	Zip Code <b>32034-0000</b>
---------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>JUST SOLD COMPANY</b>	Occupation (for Individual) <b>LOOKING FOR NEW OPPORTUNITIES</b>
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2015.00**

Date of Receipt  
**08 / 24 / 2016**

**Transaction ID : SA11AI.31596**

Amount of Each Receipt this Period  
**2015.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2580.00</b>
<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 29 OF 258
	<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)  
**American Horizons PAC**

**A. C, DONAHUE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5955 CHAMBERY CIRCLE

City RENO	State NV	Zip Code 89511-0000
--------------	-------------	------------------------

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

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) N/A
---	------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 09 / 25 / 2016  
**Transaction ID : SA11AI.26631**

Amount of Each Receipt this Period  
 300.00

Memo Item

**B. C, GENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 BRINKER ROAD

City WELLSBURG	State WV	Zip Code 26070-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) FINANCIAL WEST GROUP	Occupation (for Individual) SECURITIES DEALER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 07 / 30 / 2016  
**Transaction ID : SA11AI.5728**

Amount of Each Receipt this Period  
 230.00

Memo Item

**C. CAIN, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2207 GLENDALE BLVD

City VALPARAISO	State IN	Zip Code 46383-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DR. MICHAEL E. SILVERT	Occupation (for Individual) PRACTICE ADMINISTRATOR
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 07 / 19 / 2016  
**Transaction ID : SA11AI.19010**

Amount of Each Receipt this Period  
 515.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1045.00
<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 30 OF 258
	<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)  
**American Horizons PAC**

**A. CAIN, TYLER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 ARIZONA AVENUE NORTHEAST # 135  
 City ATLANTA State GA Zip Code 30307-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) DAY TRADER  
 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  
 07 / 09 / 2016  
**Transaction ID : SA11AI.13485**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. CALABRO, JOANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3406 POPLAR STREET  
 City OCEANSIDE State NY Zip Code 11572-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) A.S.A.P. FREIGHT SYSTEMS INC Occupation (for Individual) INT'L FREIGHT FORWARDER BUSIN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.10703**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. CAMILLO, PAULA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2769 DEWHURST COVE  
 City GERMANTOWN State TN Zip Code 38138-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BAPTIST MEMORIAL HOSPITAL Occupation (for Individual) REGISTERED NURSE  
 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  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12236**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 31 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CANADA, LIZ, , ,**

Mailing Address **2536 DANIELLE DR 7**

City <b>NIAGARA FALLS</b>	State <b>NY</b>	Zip Code <b>14304-0000</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>NIAGARA FALLS SCHOOLS</b>	Occupation (for Individual) <b>TEACHER</b>
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 10 / 2016**

**Transaction ID : SA11AI.13875**

Amount of Each Receipt this Period  
**265.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Cardon, Jan, , ,**

Mailing Address **7948 E 100 S**

City <b>Huntsville</b>	State <b>UT</b>	Zip Code <b>84317-0000</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>NONE</b>	Occupation (for Individual) <b>NONE</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1280.00**

Date of Receipt  
**09 / 29 / 2016**

**Transaction ID : SA11AI.8040**

Amount of Each Receipt this Period  
**1015.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CARGILE, DANIELLE, , ,**

Mailing Address **3030 PLACER CT**

City <b>FORT COLLINS</b>	State <b>CO</b>	Zip Code <b>80526-0000</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>BANNER HEALTH</b>	Occupation (for Individual) <b>RECRUITER</b>
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 12 / 2016**

**Transaction ID : SA11AI.16173**

Amount of Each Receipt this Period  
**265.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1545.00</b>
<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 32 OF 258
	<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)  
**American Horizons PAC**

**A. CARNER, BETTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 WILCOX AVE  
 City LOS ANGELES State CA Zip Code 90004-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23639**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. CARO, MARLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 379 PALISADE AVE  
 City JERSEY CITY State NJ Zip Code 07307-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) SCHOOL OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2016  
**Transaction ID : SA11AI.11301**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. CARPINELLI, LAURA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1612 FUNNY CIDE DRIVE  
 City WAXHAW State NC Zip Code 28173-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE  
 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  
 07 / 09 / 2016  
**Transaction ID : SA11AI.13729**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<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 33 OF 258
	<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)  
**American Horizons PAC**

**A. CARROLL, KATIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1490 PUMPING STATION RD  
 City GETTYSBURG State PA Zip Code 17325-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GUY CARPENTER & CO Occupation (for Individual) ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 08 / 23 / 2016  
**Transaction ID : SA11AI.29764**  
 Amount of Each Receipt this Period  
 350.00  
 Memo Item

**B. CASE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2051 WHYTE PARK AVE  
 City WALNUT CREEK State CA Zip Code 94595-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 07 / 16 / 2016  
**Transaction ID : SA11AI.5615**  
 Amount of Each Receipt this Period  
 1100.00  
 Memo Item

**C. CAVERLY, GORDON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6065 HEARTHSIDE PLACE  
 City GRAND BLANC State MI Zip Code 48439-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MID-STATE CONSULTANTS INC. Occupation (for Individual) REGIONAL VICE-PRESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 09 / 12 / 2016  
**Transaction ID : SA11AI.15132**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1665.00
<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 34 OF 258
	<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)  
**American Horizons PAC**

**A. CAVINESS, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 490 NEWLAND ST  
 City LAKEWOOD State CO Zip Code 80226-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DOUBLE COVERAGE LANDSCAPES Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.28854**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. CHANDLER, MARTHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 AUSTEN DRIVE  
 City HUDSON OAKS State TX Zip Code 76087-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2016  
**Transaction ID : SA11AI.31073**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. CHAPMAN, ED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 114 PECK BOULEVARD  
 City LAFAYETTE State LA Zip Code 70508-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED FEDERAL GOVERNMENT Occupation (for Individual) INTERNAL AUDITOR (USCS TREASUR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2016  
**Transaction ID : SA11AI.8291**  
 Amount of Each Receipt this Period  
 390.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	905.00
<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 35 OF 258
	<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)  
**American Horizons PAC**

**A. CLARK-COLEMAN, BEVERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3925 S. COLORADO BLVD.  
 City ENGLEWOOD State CO Zip Code 80113-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) B.A. CLARK INV. Occupation (for Individual) REAL ESTATE INVESTMENTS  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.18370**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. CLAYPOOL, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1180 LINDA VISTA AVE  
 City PASADENA State CA Zip Code 91103-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLAYPOOL LAW FIRM Occupation (for Individual) LAWYER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.24988**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. CLEMENT, RYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 59 SHADOWLAWN RD  
 City MARIETTA State GA Zip Code 30067-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLEMENT EQUIPMENT CO Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2016  
**Transaction ID : SA11AI.17310**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1795.00
<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 36 OF 258
	<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)  
**American Horizons PAC**

**A. CLENDENIN, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1377 AHWAHNEE ACT  
 City MERCED State CA Zip Code 95340-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.6478**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. COLE, ESSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 432  
 City ANSTED State WV Zip Code 25812-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) COOK  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.4894**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. COOK, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24615 E. JOSEPH  
 City OTIS ORCHARDS State WA Zip Code 99027-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OWNER COOKFORMS INC. Occupation (for Individual) CONCRETE CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.5662**  
 Amount of Each Receipt this Period  
 255.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	570.00
<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 37 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. COSTANZA, VINCENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 VETERANS MEMORIAL BLVD  
 City KENNER State LA Zip Code 70062-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASM Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.18430**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. CRETELLA, MAUREEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 HILLCREST DRIVE  
 City WAYNE State NJ Zip Code 07470-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTER SHEET METAL Occupation (for Individual) EXECUTIVE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24566**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. CROSBY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3861 IRISHTOWN SOUTHWORTH RD.  
 City FARMDALE State OH Zip Code 44417-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) GENTLEMAN FARMER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : SA11AI.15613**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1545.00
<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 38 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. CROUL, SUSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O BOX 143  
 City SUN VALLEY State ID Zip Code 83353-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.20282**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. CROW, ART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2002 S EAGLE COURT  
 City AURORA State CO Zip Code 80014-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) APOLLO SECURITY INTERNATIONAL Occupation (for Individual) SECURITY DIRECTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2016  
**Transaction ID : SA11AI.16692**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. D., JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O.BOX 519  
 City MOHALL State ND Zip Code 58761-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GREEN AG SERVICES Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2016  
**Transaction ID : SA11AI.16379**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1265.00
<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 39 OF 258
	<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	<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)  
**American Horizons PAC**

**A. DAVENPORT, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1705 SPARTAN LANE  
 City HOSCHTON State GA Zip Code 30548-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRANSACTION ALLOTMENT INC. Occupation (for Individual) INSURANCE SALES/ADMINISTRATIO  
 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  
 07 / 18 / 2016  
**Transaction ID : SA11AI.16532**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. DAVIDSON, JONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8134 MARSEILLE DR  
 City CORPUS CHRISTI State TX Zip Code 78414-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANALYTICAL TESTING OF TX Occupation (for Individual) SM BUS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25845**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. DAVIS, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 LAKE END ROAD  
 City NEWFOUNDLAND State NJ Zip Code 07435-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) BIOTECH  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27242**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1015.00
<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:	PAGE 40 OF 258
	(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)  
**American Horizons PAC**

**A. DE, JAIME, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1635 NOVATO BLVD

City NOVATO	State CA	Zip Code 94947-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) ALLSITE BUILDING SUPPLY	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

**Transaction ID : SA11AI.28515**

Amount of Each Receipt this Period  
515.00

Memo Item

**B. DEETS, STEVEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5690 ALLENTOWN BLVD.

City HARRISBURG	State PA	Zip Code 17112-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) DENTIST
---	--

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
07		30		2016

**Transaction ID : SA11AI.4673**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. DENNIS, MIKE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 DEER OAKS DRIVE

City PLEASANTON	State CA	Zip Code 94588-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NCM DIRECT DELIVERY	Occupation (for Individual) CEO
--	------------------------------------

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
07		07		2016

**Transaction ID : SA11AI.11295**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1015.00
<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 41 OF 258
	<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)  
**American Horizons PAC**

**A. DERHAM, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 HURON ROAD  
 City BELLEROSE State NY Zip Code 11001-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INTER INSURANCE Occupation (for Individual) AGENT  
 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  
 07 / 20 / 2016  
**Transaction ID : SA11AI.18747**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. DEROBIO, JOE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 621 ACACIA  
 City CORONA DEL MAR State CA Zip Code 92625-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MILLENNIUM CAPITAL PARTNERS LLC Occupation (for Individual) FINANCE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.20080**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. DEVOURSNEY, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4117 LONE OAK RD  
 City NASHVILLE State TN Zip Code 37215-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACTOR Occupation (for Individual) ACTING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6312**  
 Amount of Each Receipt this Period  
 415.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1680.00
<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 42 OF 258
	<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)  
**American Horizons PAC**

**A. DICOSTANZO, DENISE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1814 COSTABLE COURT

City CORTLANDT MANOR	State NY	Zip Code 10567-0000
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDCO ACCOUNTING SERVICES INC	Occupation (for Individual) OFFICE MGR OWNER
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

**Transaction ID : SA11AI.15871**

Amount of Each Receipt this Period  
515.00

Memo Item

**B. DIVITO, DONNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 LOUISE AVENUE

City BELLPORT	State NY	Zip Code 11713-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) N Y S WORKERS COMPENSATION BOARD	Occupation (for Individual) CLAIMS EXAMINER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.30861**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. DIXON, ROBIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3082 DEER CREEK CT

City ANN ARBOR	State MI	Zip Code 48105-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) MOM
---	------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

**Transaction ID : SA11AI.28018**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<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 43 OF 258
	<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)  
**American Horizons PAC**

**A. DOBBIN, SANDRIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4748 LOMA DE COBRE DR  
 City EL PASO State TX Zip Code 79934-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED/ARTIST  
 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  
 08 / 05 / 2016  
**Transaction ID : SA11AI.30108**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. DOHRMANN, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6801 VIA CAMPESTRE  
 City LAS CRUCES State NM Zip Code 88007-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ELECTRONIC CAREGIVER COMPANY Occupation (for Individual) CHIEF EXECUTIVE OFFICER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23565**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. DOLLAR-PERRY, YVONNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 540 WATERFORD ROAD  
 City HOCKESSIN State DE Zip Code 19707-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PERRY & ASSOCIATES INC Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2016  
**Transaction ID : SA11AI.7999**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	695.00
<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 44 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DOMAN, JEFFREY, , ,**

Mailing Address 3306 DREXEL DRIVE

City DALLAS	State TX	Zip Code 75205-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) DOMAN CAPITAL	Occupation (for Individual) PRESIDENT
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2016

**Transaction ID : SA11AI.15851**

Amount of Each Receipt this Period  
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DONNELL, LORI, , ,**

Mailing Address 31 BRISTOL GRN

City SAN ANTONIO	State TX	Zip Code 78209-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) RANCHER
--	--

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
07	/	01	/	2016

**Transaction ID : SA11AI.8920**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DRAKE, STEVEN, , ,**

Mailing Address 1765 BEECHTREE

City CHARLESTON	State IL	Zip Code 61920-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) HOME BUILDER
---	---

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
07	/	26	/	2016

**Transaction ID : SA11AI.23951**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<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 45 OF 258
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. DRUDE, BARRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2357 ROOKERY WAY

City VIRGINIA BEACH	State VA	Zip Code 23455-0000
------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

**Transaction ID : SA11AI.24824**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. DUKE, DAYNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 S AIR DEPOT

City EDMOND	State OK	Zip Code 73013-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) ENDODONTIST
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
530.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

**Transaction ID : SA11AI.25877**

Amount of Each Receipt this Period  
530.00

Memo Item

**C. DUNCAN, RONALD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30547 LAUREL CT

City DAPHNR	State AL	Zip Code 36526-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) TUPELO FURNITURE OUTLET	Occupation (for Individual) RETAILER
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

**Transaction ID : SA11AI.6148**

Amount of Each Receipt this Period  
215.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1010.00
<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 46 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DUNN-MARSHALL, VICKI, , ,**

Mailing Address 5250 RT 60 EAST

City HUNTINGTON	State WV	Zip Code 25705-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DLC PIZZA INC	Occupation (for Individual) MANAGEMENT
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

**Transaction ID : SA11AI.27188**

Amount of Each Receipt this Period  
515.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. EICHEL, LAURA, , ,**

Mailing Address 1481 WEST ESPLANADE AVE

City HEMET	State CA	Zip Code 92543-0000
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BAR OWNER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

**Transaction ID : SA11AI.19849**

Amount of Each Receipt this Period  
265.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ELLEN, CHERYL, , ,**

Mailing Address 4750 RABBIT MOUNTAIN ROAD

City BROOMFIELD	State CO	Zip Code 80020-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
08		03		2016

**Transaction ID : SA11AI.29358**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<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 47 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. ENO, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4585 S. LOGAN ST.  
 City ENGLEWOOD State CO Zip Code 80113-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REALTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21417**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. ERICKSON, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2108 HENDOLA DR NE  
 City ALBUQUERQUE State NM Zip Code 87110-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITY OF ALBUQUERQUE Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.15469**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. ERNST, CHRISTINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37570 RUBEN LANE  
 City SANDY State OR Zip Code 97055-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ERNST MANUFACTURING Occupation (for Individual) INVENTER  
 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  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20571**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<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 48 OF 258
	<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)  
**American Horizons PAC**

**A. ERNST, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37570 RUBEN LANE  
 City EAGLE CREEK State OR Zip Code 97022-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MY OWN MANUFACTURING PLANT Occupation (for Individual) AMERICAN MANUFACTURER  
 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  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20583**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. ESSWEIN, RENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1284 - CHULIO ROAD SE  
 City ROME State GA Zip Code 30161-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ERGO-CHILD LLC Occupation (for Individual) INVENTOR/MANUFACTURER OF PA  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2016  
**Transaction ID : SA11AI.6861**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. EUBANKS, CAROLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 S. JOHN ST.  
 City BLACKSBURG State SC Zip Code 29702-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HRI INC. Occupation (for Individual) CONTRACT ADMINISTRATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2016  
**Transaction ID : SA11AI.30723**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	665.00
<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 49 OF 258
	<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)  
**American Horizons PAC**

**A. EVANS, PATTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6050 N COUNTY ROAD 375 EAST

City PITTSBORO	State IN	Zip Code 46167-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) THE MEADOWS	Occupation (for Individual) CHIEF MARKETING OFFICIER
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2016

**Transaction ID : SA11AI.25997**

Amount of Each Receipt this Period  
 265.00

Memo Item

**B. F, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 BENTWATERS LANE

City MADISON	State CT	Zip Code 06443-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2016

**Transaction ID : SA11AI.24648**

Amount of Each Receipt this Period  
 300.00

Memo Item

**C. F., LUIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10824 NW 26 ST

City SUNRISE	State FL	Zip Code 33322-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) JACOBO AND ASSOCIATES	Occupation (for Individual) BUSINESS CONSULTANT
--	--

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  
 08 / 02 / 2016

**Transaction ID : SA11AI.28597**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1565.00
<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 50 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. FELMAN, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3503 BEAVER FORD RD  
 City WOODBRIDGE State VA Zip Code 22192-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE MITRE CORPORATION Occupation (for Individual) RESEARCH AND DEVELOPMENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21516**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. FENNELL, CHARLOTTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11257 WINE PALM ROAD  
 City FORT MYERS State FL Zip Code 33966-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SHRIMP SHACK Occupation (for Individual) RESTAURANT OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2016  
**Transaction ID : SA11AI.22521**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. FERIA, MAXIMUS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address POR BOX  
 City REDLANDS State CA Zip Code 92375-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAXIMUS FERIA STATE FARM AGENCY Occupation (for Individual) BUSINESS OWNER  
 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  
 07 / 13 / 2016  
**Transaction ID : SA11AI.16734**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	780.00
<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:	PAGE 51 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. FERRIS, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5111 N.10TH ST.  
 City MCALLEN State TX Zip Code 78504-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UTRGV Occupation (for Individual) LIBRARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2016  
**Transaction ID : SA11AI.5423**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. FILI, GAYLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4725 S 184TH PLAZA  
 City OMAHA State NE Zip Code 68135-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12332**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. FISHER, CAROLEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 8774  
 City KALISPELL State MT Zip Code 59904-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROCKY MOUNTAIN HEART & LUNG Occupation (for Individual) PBX OPERTOT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.8305**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	780.00
<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 52 OF 258
<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)  
**American Horizons PAC**

**A. FLECK, ANITA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 911 OTTO LANE

City WARMINSTER	State PA	Zip Code 18974-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) FIRST PLATINUM ABSTRACT LLC	Occupation (for Individual) TITLE INSURANCE CLERK/NOTARY
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21938**

Amount of Each Receipt this Period  
 265.00

Memo Item

**B. FLEISNER, RITA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 286

City RICHFIELD	State WI	Zip Code 53076-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SUPER NOVA CORPORATION	Occupation (for Individual) PRESIDENT
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2016  
**Transaction ID : SA11AI.31445**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C. FOX, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16211 MIDDLE ISLAND DR

City SOUTH BEND	State NE	Zip Code 68058-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) UBS FINANCIAL SERVICES	Occupation (for Individual) FINANCIAL ADVISOR
---	--

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  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25837**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1015.00
<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 53 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FREDRICKSON, CAROLE, , ,**

Mailing Address **8125 JEFFERSON HWY**

City <b>BATON ROUGE</b>	State <b>LA</b>	Zip Code <b>70809-0000</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>STYLIST</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**07 / 23 / 2016**

**Transaction ID : SA11AI.9487**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FREEMAN, SHARON, , ,**

Mailing Address **2240 RESIDENCE CIRCLE**

City <b>NAPLES</b>	State <b>FL</b>	Zip Code <b>34105-0000</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>K-I LBR AND BLD MATERIALS INC</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**08 / 13 / 2016**

**Transaction ID : SA11AI.31205**

Amount of Each Receipt this Period  
**500.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FRICK, GARY, , ,**

Mailing Address **10225 TELEPHONE RD SUITE E**

City <b>VENTURA</b>	State <b>CA</b>	Zip Code <b>93004-0000</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>OPTOMETRIST</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**205.00**

Date of Receipt  
**08 / 09 / 2016**

**Transaction ID : SA11AI.30751**

Amount of Each Receipt this Period  
**205.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>955.00</b>
<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 54 OF 258
<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)  
**American Horizons PAC**

**A. G, DENNIS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 OAKMONT CT

City LITTLE ROCK	State AR	Zip Code 72212-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) FROST PLLC	Occupation (for Individual) CPA
---	------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

**Transaction ID : SA11AI.18516**

Amount of Each Receipt this Period  

265.00
--------

 Memo Item

**B. G., THERESE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 HOLLAND PARK

City MOBILE	State AL	Zip Code 36608-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) RETIRED
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	05	/	2016

**Transaction ID : SA11AI.25711**

Amount of Each Receipt this Period  

500.00
--------

 Memo Item

**C. GAGLIANO, ANGELO V., , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9003 STONELAND DRIVE

City SAN ANTONIO	State TX	Zip Code 78230-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

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
07	/	30	/	2016

**Transaction ID : SA11AI.27272**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1015.00
<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 55 OF 258
	<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)  
**American Horizons PAC**

**A. GAMPPER, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5318 CATTAIL CT  
 City FRISCO State TX Zip Code 75034-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DENISON GLASS Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2016  
**Transaction ID : SA11AI.23257**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. GAULTNEY, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5530 EDGERTON DRIVE  
 City NORCROSS State GA Zip Code 30092-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.6793**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. GEIGER, JENNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1419 N RICHMAN KNOLL  
 City FULLERTON State CA Zip Code 92835-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALIGNMENT HEALTHCARE Occupation (for Individual) COO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2016  
**Transaction ID : SA11AI.30390**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<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 56 OF 258
	<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)  
**American Horizons PAC**

**A. GENOBLES-PUFFER, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2505 WYDOWN LANE  
 City AURORA State IL Zip Code 60502-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MILESTONE EQUIPMENT COMPANY Occupation (for Individual) TRANSPORTATION EXEXECUTIVE.  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.19749**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. GENTRY, AMANDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1180 CR 110  
 City CARTHAGE State MO Zip Code 64836-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11AI.13399**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. GILDEA, DONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 TOWER POINT ROAD  
 City CENTREVILLE State MD Zip Code 21617-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) G SQUARED TECHNOLOGIES INC. Occupation (for Individual) PRESIDENT/OWNER  
 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  
 07 / 23 / 2016  
**Transaction ID : SA11AI.22034**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	965.00
<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 57 OF 258
	<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)  
**American Horizons PAC**

**A. GINRICH, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 RUDDERS CROSSING  
 City NEWNAN State GA Zip Code 30263-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) HOUSEWIFE  
 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  
 07 / 18 / 2016  
**Transaction ID : SA11AI.18512**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. GLADSHTEYN, OLEG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2018 16TH AVE  
 City SOUTH SAN FRANCISCO State CA Zip Code 94080-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EVERLAST POWER EQUIPMENT INC Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2016  
**Transaction ID : SA11AI.19314**  
 Amount of Each Receipt this Period  
 3015.00  
 Memo Item

**C. GLASER, SHEILA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3712 RIDGE WAY  
 City BISMARCK State ND Zip Code 58503-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SPACE ALIENS GRILL & BAR Occupation (for Individual) CHIEF OPERATIONS OFFICER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.18506**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3530.00
<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 58 OF 258
<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)  
**American Horizons PAC**

**A. GLENN, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1213 TORREY PINES  
 City COLUMBIA State MO Zip Code 65203-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MO COTTON EXCHANGE Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12374**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. GLOVER, DAVID AND LYNN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 688 SWEETWATER COVE  
 City TROY State TN Zip Code 38260-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) HOME BUSINESS  
 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  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25723**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. GOBLE, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 915 CLASSON LANE  
 City BEECH GROVE State IN Zip Code 46107-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) VIBRATION TECHNICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2016  
**Transaction ID : SA11AI.30731**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<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 59 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GONZALEZ, JORGE, , ,**

Mailing Address **2240 CLAY ST #607**

City <b>DENVER</b>	State <b>CO</b>	Zip Code <b>80211-0000</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>YOUR CASTLE REALTY</b>	Occupation (for Individual) <b>REALTOR/INVESTOR</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**515.00**

Date of Receipt  
**07 / 28 / 2016**

**Transaction ID : SA11AI.26433**

Amount of Each Receipt this Period  
**515.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GOODIE, GERRY, , ,**

Mailing Address **9495 ACOSTA WAY**

City <b>SACRAMENTO</b>	State <b>CA</b>	Zip Code <b>95827-0000</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>GOODIE &amp; SONS</b>	Occupation (for Individual) <b>OWNER</b>
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**315.00**

Date of Receipt  
**09 / 22 / 2016**

**Transaction ID : SA11AI.6156**

Amount of Each Receipt this Period  
**315.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GRABOSKI, MICHELLE, , ,**

Mailing Address **7956 CANOPY TERRACE**

City <b>POMPANO BEACH</b>	State <b>FL</b>	Zip Code <b>33076-0000</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>PILATES INSTRUCTOR</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

Date of Receipt  
**08 / 18 / 2016**

**Transaction ID : SA11AI.31322**

Amount of Each Receipt this Period  
**200.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1030.00</b>
<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 60 OF 258
	<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)  
**American Horizons PAC**

**A. GRAVES, JAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44269 S BAPTIST RDD  
 City HAMMOND State LA Zip Code 70403-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.4904**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. GRIFFIN, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4944 STEELE WAY  
 City FAIR OAKS State CA Zip Code 95628-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GRIFFIN ELECTRIC INC. Occupation (for Individual) ELECTRICAL CONTRACTOR  
 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  
 07 / 26 / 2016  
**Transaction ID : SA11AI.23969**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. GROOVER, LIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17065 KINGFISH LN W  
 City SUGARLOAF KEY State FL Zip Code 33042-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2016  
**Transaction ID : SA11AI.28204**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	790.00
<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:	PAGE 61 OF 258
	(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)  
**American Horizons PAC**

**A. GUEBERT, SHARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1134 ROSE OF SHARON ROAD  
 City COULTERVILLE State IL Zip Code 62237-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DAIRY FARMER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6578**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. HAGEN, KATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3327 FOREST VIEW LANE  
 City RENO State NV Zip Code 89511-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.8705**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. HALAGES, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5474 SUMMER HILL LANE  
 City WINSTON SALEM State NC Zip Code 27106-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HALAWHITE Occupation (for Individual) MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.11259**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2230.00
<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 62 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. HALEY, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2020 SADDLEWOOD DRIVE  
 City BARTOW State FL Zip Code 33830-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) WAS PROBATION OFFICER- RETIREE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 19 / 2016  
**Transaction ID : SA11AI.31421**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. HAMMES, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 TURKEY TROT  
 City BLAIRSVILLE State GA Zip Code 30512-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ON BOARD/DUPONT CROP PROTECTION Occupation (for Individual) TECH REP  
 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  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27548**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. HAMPTON, MARTI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 LYNN ROAD  
 City RALEIGH State NC Zip Code 27609-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BROKER OWNER Occupation (for Individual) REAL ESTATE BROKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2016  
**Transaction ID : SA11AI.30448**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	665.00
<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 63 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. HAMRICK, EDNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 19803W US 90

City GREENVILLE	State FL	Zip Code 32332-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) FORMERLY ACCOUNTS PAYABLE
--	--

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  
07 / 22 / 2016  
**Transaction ID : SA11AI.21772**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. HARMS, MICHAEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5512 BUSINESS DR.

City WILMINGTON	State NC	Zip Code 28405-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BLITZ RESEARCH	Occupation (for Individual) PRESIDENT
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 24 / 2016  
**Transaction ID : SA11AI.31600**

Amount of Each Receipt this Period  
515.00

Memo Item

**C. HARNEY, PENNY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 850 CONNIE ALLEN RD

City MCKENZIE	State TN	Zip Code 38201-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) STUDENY
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 22 / 2016  
**Transaction ID : SA11AI.4902**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	795.00
<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 64 OF 258
	<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)  
**American Horizons PAC**

**A. HARSHMAN, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11257 WINE PALM ROAD  
 City FORT MYERS State FL Zip Code 33966-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SHRIMP SHACK Occupation (for Individual) RESTAURANT OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2016  
**Transaction ID : SA11AI.22519**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. HART, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 461 STATE ROAD  
 City VINEYARD HAVEN State MA Zip Code 02568-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HART PLUMBING Occupation (for Individual) PLUMBER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.16409**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. HELBERG, TIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 PACIFICA WAY  
 City HOT SPRINGS VILLAGE State AR Zip Code 71909-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSC Occupation (for Individual) ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14683**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	795.00
<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 65 OF 258
	<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)  
**American Horizons PAC**

**A. HIGGINS, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 APPLGATE DR  
 City WEST CHESTER State PA Zip Code 19382-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARGENT ASSET GROUP LLC Occupation (for Individual) HARD ASSETS  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 09 / 2016  
**Transaction ID : SA11AI.7075**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. HILL, NATALYA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5204 COFFEETREE DRIVE  
 City RALEIGH State NC Zip Code 27613-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SIERRA PACIFIC Occupation (for Individual) MORTGAGE LOAN OFFICER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2016  
**Transaction ID : SA11AI.26283**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. HINKLE, JOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1755 SLAYTON DRIVE  
 City BLUE BELL State PA Zip Code 19422-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.4908**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	505.00
<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 66 OF 258
	<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)  
**American Horizons PAC**

**A. HIXON, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3230 BRAXTON CIR  
 City PENSACOLA State FL Zip Code 32504-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEORGIO'S PIZZA Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2016  
**Transaction ID : SA11AI.31055**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. HOBSON, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 EVANWOOD DR NE  
 City NEWARK State OH Zip Code 43055-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PLAYWORLD MIDSTATES Occupation (for Individual) OWNER/PRESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23387**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. HOCHBERGER, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 111180  
 City NAPLES State FL Zip Code 34108-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.19737**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3165.00
<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 67 OF 258
	<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)  
**American Horizons PAC**

**A. HOHMANN, DEANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2614 UNIVERSITY AVE  
 City DUBUQUE State IA Zip Code 52001-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) TEACHER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27109**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. HOLLAND, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3310 S SHADY LANE  
 City ARLINGTON State TX Zip Code 76001-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GARY DS AUTOMOTIVE Occupation (for Individual) BOOKKEEPER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2016  
**Transaction ID : SA11AI.8205**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. HOLLAND, KATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 828 TYNER WAY  
 City INCLINE VILLAGE State NV Zip Code 89451-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.18372**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2295.00
<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 68 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. HOLMES, BRET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 302 MARCH STREET  
 City UNION SPRINGS State AL Zip Code 36089-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF STATES Occupation (for Individual) MANAGEMENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : SA11AI.29162**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. HONS, CEANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13200 MANSFIELD DR  
 City AUSTIN State TX Zip Code 78732-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.13337**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. HOPKINS, BRIDGET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12161SKYWAY DRIVE  
 City SANTA ANA State CA Zip Code 92705-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHERN AEROSPACE METALS LLC Occupation (for Individual) PRESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.19717**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1080.00
<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 69 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. HOPKINS, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 80

City NEW PORT RICHEY	State FL	Zip Code 34656-0000
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) ATTORNEY
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016

**Transaction ID : SA11AI.7191**

Amount of Each Receipt this Period  
 215.00

Memo Item

**B. HUNDLEY, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 HAWTHORNE LANE

City TRABUCO CANYON	State CA	Zip Code 92679-0000
------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) GENERAL CONTRACTOR
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016

**Transaction ID : SA11AI.19470**

Amount of Each Receipt this Period  
 265.00

Memo Item

**C. HUNTER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 206 ORELAND MILL RD

City ORELAND	State PA	Zip Code 19075-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) POCONO TURF SUPPLY	Occupation (for Individual) MANAGER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2016

**Transaction ID : SA11AI.18552**

Amount of Each Receipt this Period  
 265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	745.00
<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:	PAGE 70 OF 258
	(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)  
**American Horizons PAC**

**A. HUNTER, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2048 UPLAND DR  
 City FRANKLIN State TN Zip Code 37067-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STATE OF TENNESSEE Occupation (for Individual) INVESTIGATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2016  
**Transaction ID : SA11AI.4888**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. IRETON, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9511 STONEYBROCK PLACE  
 City RANCHO CUCAMONGA State CA Zip Code 91730-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRANSAMERICA FINANCIAL ADVISORS Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2016  
**Transaction ID : SA11AI.25965**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. J, LINNEA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2795 ENTERPISE AVENUE #6  
 City BILLINGS State MT Zip Code 59102-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MYSELF Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.31511**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	485.00
<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 71 OF 258
	<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)  
**American Horizons PAC**

**A. J, MARIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8404 CARRANZO DRIVE  
 City AUSTIN State TX Zip Code 78735-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FILMMAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.19873**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. JACKSON, DAKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1661 FM 535  
 City SMITHVILLE State TX Zip Code 78957-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) WATER WELL DRILLER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2016  
**Transaction ID : SA11AI.26521**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. JACOPI, BELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 95 PACHECO CREEK DR.  
 City NOVATO State CA Zip Code 94949-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.7720**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1580.00
<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 72 OF 258
	<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)  
**American Horizons PAC**

**A. JAYSON, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 132 TORCH VIEW DR  
 City KEWADIN State MI Zip Code 49648-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PONEMON INSTITUTE Occupation (for Individual) RESEARCHER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : SA11AI.29036**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. JENKINS, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 ANDY JOHNS DR  
 City SMYRNA State TN Zip Code 37167-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RIGHT PRICE AUTO SALES INC. Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24239**  
 Amount of Each Receipt this Period  
 2515.00  
 Memo Item

**C. Jobe, Buddy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8185 e alameda rd  
 City Scottsdale State AZ Zip Code 85255-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PHOENIX INTERNATIONAL RACEWAY Occupation (for Individual) OWNER/ RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2016  
**Transaction ID : SA11AI.5660**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5780.00
<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 73 OF 258
	<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)  
**American Horizons PAC**

**A. JOHNSON, CHAZ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1853 ROCHESTER IND CT  
 City ROCHESTER State MI Zip Code 48309-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHERN STAMPINGS INC Occupation (for Individual) PRESIDENT  
 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  
 07 / 04 / 2016  
**Transaction ID : SA11AI.8349**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. JOHNSON, KAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 708 RESTON DR  
 City TUSCALOOSA State AL Zip Code 35406-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21111**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. JOHNSON, RICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 295  
 City HIGLEY State AZ Zip Code 85236-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AERO PRODUCTS Occupation (for Individual) SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20452**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	765.00
<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:	PAGE 74 OF 258
	(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)  
**American Horizons PAC**

**A. JONES, TODD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 431 W GAYWOOD

City HOUSTON	State TX	Zip Code 77079-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BBMC MORTGAGE	Occupation (for Individual) FINANCIAL SERVICES
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1015.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

**Transaction ID : SA11AI.13259**

Amount of Each Receipt this Period  
1015.00

Memo Item

**B. JORDAN, RALPH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1022 MAIN ST SUITE Q

City DUNEDIN	State FL	Zip Code 34698-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) TRIDENT HEALTH RESOURCES	Occupation (for Individual) CEO/OWNER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1015.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

**Transaction ID : SA11AI.27095**

Amount of Each Receipt this Period  
1015.00

Memo Item

**C. KALIN, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 QUAIL RUN

City NORTH ANDOVER	State MA	Zip Code 01845-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) MORTGAGEMASTER	Occupation (for Individual) LOAN OFFICER
---	---

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
07		29		2016

**Transaction ID : SA11AI.18448**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2280.00
<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 75 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. KALMBACH, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16355 TOWNSHIP ROAD 25  
 City ARLINGTON State OH Zip Code 45814-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KALMBACH FEEDS INC Occupation (for Individual) SELF EMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 08 / 01 / 2016  
**Transaction ID : SA11AI.28230**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. KARL, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 SLEEPY HOLLOW DRIVE  
 City NEWTOWN SQUARE State PA Zip Code 19073-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 07 / 17 / 2016  
**Transaction ID : SA11AI.17296**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. KAY, GREGOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 349 KIKALALOA ST  
 City HILO State HI Zip Code 96720-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23915**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1780.00
<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 76 OF 258
<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)  
**American Horizons PAC**

**A. KEHL, BOBBY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5110 LAKEVIEW AVE.  
 City YORBA LINDA State CA Zip Code 92886-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIRST TEAM REAL ESTATE Occupation (for Individual) REALTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.23691**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. KELLEY, KENJO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 216 CR 912 A  
 City BRAZORIA State TX Zip Code 77422-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) KENJOS BBQ BRAZORIA TX  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.7975**  
 Amount of Each Receipt this Period  
 415.00  
 Memo Item

**C. KEMMESAT, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2000 RIVER DR NE  
 City MANDAN State ND Zip Code 58554-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FRONTIER PRECISION INC Occupation (for Individual) EXECUTIVE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23631**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<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 77 OF 258
<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)  
**American Horizons PAC**

**A. KENEMORR, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2000 DESERT SUN DR.  
 City EL PASO State TX Zip Code 79938-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BATTERY CONCEPTS INTERNATIONAL INC. Occupation (for Individual) SALES / ENTREPRENEUR/ CEO SMA  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.10749**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. KENNEDY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3990 RUM ROW  
 City NAPLES State FL Zip Code 34102-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) MARKETING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.13091**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. KIGER, DAVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 BROOKSTONE DR  
 City FOREST State VA Zip Code 24551-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2016  
**Transaction ID : SA11AI.20603**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	845.00
<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:	PAGE 78 OF 258
	(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)  
**American Horizons PAC**

**A. KING, LEINAIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7345 SPINNAKER ST.  
 City CARLSBAD State CA Zip Code 92011-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OWNER OF WOMAN OWNED CONSTRUCTION TRU Occupation (for Individual) TRUCK DRIVER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 08 / 12 / 2016  
**Transaction ID : SA11AI.31045**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. KIRK, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1140 BIMINI LANE  
 City WEST PALM BEACH State FL Zip Code 33404-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIMINI ENTERPRISE Occupation (for Individual) REAL ESTATE INVESTMENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 08 / 02 / 2016  
**Transaction ID : SA11AI.28601**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. KITTLEMAN, TRENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 KITTLEMAN LANE  
 City WEST FRIENDSHIP State MD Zip Code 21794-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MARYLAND GENERAL ASSEMBLY Occupation (for Individual) STATE DELEGATE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 07 / 23 / 2016  
**Transaction ID : SA11AI.22531**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2545.00
<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 79 OF 258
	<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)  
**American Horizons PAC**

**A. KLASSEN, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4109 EAST COUNTY ROAD 63  
 City MIDLAND State TX Zip Code 79705-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.11963**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. KLINKER, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12623 BUILDERS ROAD  
 City HERNDON State VA Zip Code 20170-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KB LINKS LLC Occupation (for Individual) RECRUITER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2016  
**Transaction ID : SA11AI.23545**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

**C. KNAPP, JOANNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 RIDGEWOOD BLVD  
 City BELPRE State OH Zip Code 45714-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST  
 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  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25769**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	830.00
<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 80 OF 258
<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)  
**American Horizons PAC**

**A. KNAPP, LYDIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 DEACON ABBOTT. RD  
 City REDDING State CT Zip Code 06896-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KTI UTILITY CONST Occupation (for Individual) BOOK KEEPER  
 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  
 07 / 07 / 2016  
**Transaction ID : SA11AI.8088**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. KNOTT, LAUREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 W. JOPPA RD.  
 City LUTHERVILLE TIMONIUM State MD Zip Code 21093-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOUSEWIFE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.16357**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. KO-NJ0BIUV, CAROL MATLOCK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11N750 ROHRSEN ROAD  
 City ELGIN State IL Zip Code 60120-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2016  
**Transaction ID : SA11AI.31796**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1480.00
<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 81 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. KOEBEL, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11616 WEST BROAD STREET  
 City RICHMOND State VA Zip Code 23233-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HAVANA CONNECTIONS Occupation (for Individual) MANAGMENT  
 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  
 09 / 26 / 2016  
**Transaction ID : SA11AI.5235**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. KOEMPEL, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3393 CHARLWOOD DR  
 City ROCHESTER State MI Zip Code 48306-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ERNST & YOUNG Occupation (for Individual) TAX PARTNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14247**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. KOHNEN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 WOODARD STREET  
 City CHETEK State WI Zip Code 54728-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) UTILITY LOCATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24864**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2215.00
<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 82 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. KORCHOWSKY, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4409 2ND AVE N. APT 6  
 City GREAT FALLS State MT Zip Code 59405-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STRONGHOLD INSPECTION LLC Occupation (for Individual) REFINERY INSPECTION MGR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.19260**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. KOSKI, CONSTANCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 946 DIAMOND DRIVE  
 City SANTA MARIA State CA Zip Code 93455-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) HR/PROGRAM MGR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.20444**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. KOVANDA, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 847 MAXFIELD ROD  
 City HARTLAND State MI Zip Code 48353-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NA Occupation (for Individual) AT HOME  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.8409**  
 Amount of Each Receipt this Period  
 365.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	830.00
<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:	PAGE 83 OF 258
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. KURTZ, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 SIOUX PATH  
 City STOYSTOWN State PA Zip Code 15563-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOMERSET HOSPITAL Occupation (for Individual) LAB  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.4900**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. L, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 368  
 City DE KALB State TX Zip Code 75559-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF (BATES FAMILY FUNERAL HOME) Occupation (for Individual) FUNERAL DIRECTOR - PAST NFDA F  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.13089**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

**C. LAGRONE, BART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2969 WYNDHAM WAY  
 City MELBOURNE State FL Zip Code 32940-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTARATEUR  
 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  
 08 / 04 / 2016  
**Transaction ID : SA11AI.29608**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	590.00
<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:	PAGE 84 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. LAMM, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 168 BEALE STREET  
 City MEMPHIS State TN Zip Code 38103-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2016  
**Transaction ID : SA11AI.9458**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. LANG, DEBRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1334  
 City OAK HARBOR State WA Zip Code 98277-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LANGCO NW INC. Occupation (for Individual) CONSTRUCTION COMPANY OWNER  
 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  
 07 / 29 / 2016  
**Transaction ID : SA11AI.9471**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. LANTING, ARLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26407 BRICK LANE  
 City BONITA SPRINGS State FL Zip Code 34134-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1030.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.6338**  
 Amount of Each Receipt this Period  
 1030.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2295.00
<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 85 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. LARSON, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 847 TONKAWA ROAD  
 City LONG LAKE State MN Zip Code 55356-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VIBRANT TECHNOLOGIES Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23567**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. LARSON, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3380 RAVEN  
 City WYOMING State MI Zip Code 49509-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FRUIT AND MORE Occupation (for Individual) SUBCONTRACTOR  
 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  
 07 / 20 / 2016  
**Transaction ID : SA11AI.19170**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. LASSIG, SHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9582 SOUTH WILLOW TRAIL WAY  
 City SOUTH JORDAN State UT Zip Code 84095-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITYWIDE HOME LOANS Occupation (for Individual) EXECUTIVE DIRECTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25384**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1280.00
<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 86 OF 258
	<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)  
**American Horizons PAC**

**A. LAWRENCE, EDITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2489 COUNTY ST.  
 City DIGHTON State MA Zip Code 02715-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.5427**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. LINDA, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address FT WORTH  
 City FORT WORTH State TX Zip Code 76108-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OWNER Occupation (for Individual) SELF EMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2016  
**Transaction ID : SA11AI.22813**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. LIPSEY, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6620 48TH AVE DR. E  
 City BRADENTON State FL Zip Code 34203-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SECRET Occupation (for Individual) SECRET  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2016  
**Transaction ID : SA11AI.29740**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1080.00
<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 87 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. LIU, CINDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5309 CHEROKEE ST  
 City HOUSTON State TX Zip Code 77005-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ELOVEIT LTD Occupation (for Individual) RESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2016  
**Transaction ID : SA11AI.26095**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. LOOSE, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 48 CANNON ROYAL DRIVE  
 City KEY WEST State FL Zip Code 33040-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOOSE PLASTICS INC Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.10539**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. LOPEZ, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11125 SMOKY OAK CT.  
 City ARGYLE State TX Zip Code 76226-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICAN WATER DAMAGE Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.19965**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2545.00
<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 88 OF 258
	<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)  
**American Horizons PAC**

**A. LOPRESTI, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1731B MIKAHALA WAY  
 City HONOLULU State HI Zip Code 96816-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MORGAN STANLEY Occupation (for Individual) WEALTH ADVISOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2016  
**Transaction ID : SA11AI.6003**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. LUNDBERG, BARBRAE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 EAST PALM DRIVE  
 City EXETER State CA Zip Code 93221-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FITZGERALD & LUNDBERG Occupation (for Individual) ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.18873**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. LUNDE, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130-3D CHURCH ST  
 City KINGS PARK State NY Zip Code 11754-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2016  
**Transaction ID : SA11AI.8577**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	680.00
<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 89 OF 258
	<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)  
**American Horizons PAC**

**A. LYNN, VICKIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4009 DURRETT ST  
 City FORT WORTH State TX Zip Code 76244-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTURY 21 Occupation (for Individual) RELAT ESTATE PROFFESIOAL  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6039**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. LYONS, NEIL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7805 BROWNS BRIDGE ROAD  
 City HIGHLAND State MD Zip Code 20777-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLEVELAND BIOLABS Occupation (for Individual) FINANCE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.16047**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. M., CARLOS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3325 PIEDMONT ROAD NE UNIT 2105  
 City ATLANTA State GA Zip Code 30305-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEORGIA CANCER SPECIALISTS Occupation (for Individual) PHYSICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 05 / 2016  
**Transaction ID : SA11AI.30336**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	680.00
<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 90 OF 258
	<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)  
**American Horizons PAC**

**A. MAGANA, VINCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3220 E JACINTO AVE  
 City MESA State AZ Zip Code 85204-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BYZANTIUM LLC Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.9166**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. MANCUSO, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 87-49 81ST AVENUE  
 City GLENDALE State NY Zip Code 11385-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED LAW ENFORCEMENT Occupation (for Individual) RETIRED LAW ENFORCEMENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 65.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.4884**  
 Amount of Each Receipt this Period  
 65.00  
 Memo Item

**C. MANDULAY, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1181 S 4TH ST  
 City GROVER BEACH State CA Zip Code 93433-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.5243**  
 Amount of Each Receipt this Period  
 450.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	780.00
<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 91 OF 258
	<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)  
**American Horizons PAC**

**A. MANGUM, KEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2920 MONTICELLO DRIVE

City CUMMING	State GA	Zip Code 30041-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) GOLF MANAGEMENT
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

**Transaction ID : SA11AI.23819**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. MANN, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 423 RESERVE RIDGE

City HUFFMAN	State TX	Zip Code 77336-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) REM INV INC	Occupation (for Individual) PRESIDENT
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.10537**

Amount of Each Receipt this Period  
480.00

Memo Item

**C. MARIE JACOBSEN, KIMBERLY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5350 EAST EXETER BLVD

City PHOENIX	State AZ	Zip Code 85018-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MY HANDSOME HUSBAND	Occupation (for Individual) WIFE AND MOTHER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2016

**Transaction ID : SA11AI.8521**

Amount of Each Receipt this Period  
315.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	995.00
<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 92 OF 258
<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)  
**American Horizons PAC**

**A. MARISA, DR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5548 METROWEST BOULEVARD APT 304  
 City ORLANDO State FL Zip Code 32811-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COMPANION VEYERINARIAN SERVICES Occupation (for Individual) VETERINARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.8557**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. MARTIN, RONALD D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 WOODLANDS PARK DR  
 City BRANDON State MS Zip Code 39047-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2016  
**Transaction ID : SA11AI.7853**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. MARTINEZ, KATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 BEACH ROAD #406  
 City JUPITER ISLAND State FL Zip Code 33469-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) RETIRED  
 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  
 07 / 06 / 2016  
**Transaction ID : SA11AI.5722**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	680.00
<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:	PAGE 93 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. MATEJCIK, REGIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6705 HWY 290 W SUITE 502 - 227

City AUSTIN	State TX	Zip Code 78735-0000
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CRESCENT CONSTRUCTION CO.		Occupation (for Individual) CONTRACTOR
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
07 / 12 / 2016  
**Transaction ID : SA11AI.16143**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. MCALLISTER, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 807 S. 4TH STREET LOOP

City SELAH	State WA	Zip Code 98942-0000
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PNNL		Occupation (for Individual) ENGINEER
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 40.00

Date of Receipt  
07 / 12 / 2016  
**Transaction ID : SA11AI.4898**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. MCCALL, LYNN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 67 S. HIGLEY RD. 103-441

City GILBERT	State AZ	Zip Code 85296-0000
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HUGZ4ME.COM		Occupation (for Individual) INCREDIBLE HEALTH. I CAN CHANGE
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
08 / 13 / 2016  
**Transaction ID : SA11AI.31254**

Amount of Each Receipt this Period  
215.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<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 94 OF 258
	<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)  
**American Horizons PAC**

**A. MCCARTNEY, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 NORTHRIDGE DR  
 City PULASKI State TN Zip Code 38478-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PULASKI ANESTHESIA LLC Occupation (for Individual) CRNA (NURSE ANESTHETIST)  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 07 / 30 / 2016  
**Transaction ID : SA11AI.25188**  
 Amount of Each Receipt this Period 515.00  
 Memo Item

**B. MCCLUNG, NAOMA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102B RESERVE GREEN DR.  
 City MOREHEAD CITY State NC Zip Code 28557-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) HOME MAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 07 / 12 / 2016  
**Transaction ID : SA11AI.16592**  
 Amount of Each Receipt this Period 1015.00  
 Memo Item

**C. MCCOLLUM, CAROLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 QUAIL LOOP ROAD  
 City REIDSVILLE State NC Zip Code 27320-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROCKINGHAM CO CSC Occupation (for Individual) DEPUTY CLERK/BOOKKEEPING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 08 / 02 / 2016  
**Transaction ID : SA11AI.5497**  
 Amount of Each Receipt this Period 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1745.00
<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 95 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. MCCORD, TERESSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2025 W 121ST ST S  
 City JENKS State OK Zip Code 74037-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRANSWORLD SYSTEMS Occupation (for Individual) INDEPENDENT DISTRICT SALES AGI  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 04 / 2016  
**Transaction ID : SA11AI.9965**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. MCDOWELL, COLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8235 N 62 ND PL  
 City PARADISE VALLEY State AZ Zip Code 85253-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HAIR STYLIST  
 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  
 07 / 07 / 2016  
**Transaction ID : SA11AI.11845**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. MCGUIGAN, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 603 W BURR OAK  
 City ARLINGTON HEIGHTS State IL Zip Code 60004-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INTERSTATE /HYATT HOTELS Occupation (for Individual) HOTEL GENERAL MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2016  
**Transaction ID : SA11AI.30412**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1480.00
<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 96 OF 258
	<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)  
**American Horizons PAC**

**A. MCGUIRE, CAROLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 161-16 99TH STREET  
 City HOWARD BEACH State NY Zip Code 11414-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) METRONET REALTY Occupation (for Individual) REAL ESTATE BROKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.7025**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. MCGUIRE, TRACIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 602 SMILEY AVE  
 City FOUNTAIN HILL State PA Zip Code 18015-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VWR INTERNATIONAL LLC Occupation (for Individual) DIRECTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25496**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. MCINTIRE, BOB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1336  
 City CLEVELAND State TN Zip Code 37364-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MCINTIRE & ASSOCIATES INSURANCE Occupation (for Individual) PRESIDENT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2016  
**Transaction ID : SA11AI.30729**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	665.00
<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 97 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. MECHIGIAN, ALLYSON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2246 SHORE LINE DRIVE  
 City BRIGHTON State MI Zip Code 48114-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HAMR LLC Occupation (for Individual) OFFICE MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 11 / 2016  
**Transaction ID : SA11AI.15841**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MEDINA, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 NORTON STREET  
 City HYDE PARK State MA Zip Code 02136-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITY OF BOSTON POLICE DEPARTMENT Occupation (for Individual) POLICE DETECTIVE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 10 / 2016  
**Transaction ID : SA11AI.14245**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. MEEKS, GAYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6805 ALCOVE LANE  
 City PLANO State TX Zip Code 75024-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GAYLE MEEKS Occupation (for Individual) FINANCIAL PLANNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 07 / 29 / 2016  
**Transaction ID : SA11AI.6290**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<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 98 OF 258
	<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)  
**American Horizons PAC**

**A. MEMBIELA, KIMBERLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2448 N. AVALON AVE  
 City ORANGE State CA Zip Code 92867-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REAL ESTATE FOR HOPE Occupation (for Individual) BROKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6656**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**B. MENDRO, ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 31ST AVE  
 City GULFPORT State MS Zip Code 39501-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOUSE Occupation (for Individual) HOMEMAKER  
 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  
 07 / 15 / 2016  
**Transaction ID : SA11AI.17656**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. MERSON, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3046 PINEDA CROSSING DR  
 City MELBOURNE State FL Zip Code 42940-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OWN MY OWN BUSINESS Occupation (for Individual) FAMILY FARMERS MARKET  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.8104**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	865.00
<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 99 OF 258
	<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)  
**American Horizons PAC**

**A. MESERVE, DAYNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7742 EMERALD CIRCLE UNIT 103  
 City NAPLES State FL Zip Code 34109-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NCH HEALTHCARE SYSTEM Occupation (for Individual) RN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : SA11AI.7652**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

**B. METZGER, ANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3803 MCTYRES COVE ROAD  
 City MIDLOTHIAN State VA Zip Code 23112-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYER Occupation (for Individual) MINI CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.8695**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. MICHAEL, J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7789 CLUB LANE  
 City SARASOTA State FL Zip Code 34238-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COLLINS&ASSOC Occupation (for Individual) SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24285**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1510.00
<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 100 OF 258
	<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)  
**American Horizons PAC**

**A. MICHAEL, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 BROUSSARD LN

City LAKE CHARLES	State LA	Zip Code 70607-0000
----------------------	-------------	------------------------

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

Name of Employer (for Individual) FEDEX	Occupation (for Individual) COURIER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

**Transaction ID : SA11AI.4882**

Amount of Each Receipt this Period  

30.00
-------

 Memo Item

**B. MIDDLESWORTH, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8010 GILLETT

City LENEXA	State KS	Zip Code 66215-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) DUPONT	Occupation (for Individual) MAINTENANCE MACKINAC
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
115.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2016

**Transaction ID : SA11AI.4896**

Amount of Each Receipt this Period  

115.00
--------

 Memo Item

**C. MILLS, MARISA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 LAUREL ST.

City BRAINERD	State MN	Zip Code 56401-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED/MILLS AUTOMOTIVE GROUP	Occupation (for Individual) OWNER/CEO/PRESIDENT
---	--

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
08		22		2016

**Transaction ID : SA11AI.28251**

Amount of Each Receipt this Period  

1000.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1145.00
<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 101 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. MILLSAP, CHANTELE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4101 N. 141ST STREET  
 City BASEHOR State KS Zip Code 66007-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) N/A  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.8355**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. MILNE, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 423 BRACKENWOOD LANE S  
 City PALM BEACH GARDENS State FL Zip Code 33418-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PGA GOLFPROFESSIONAL  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.19565**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. MILSAP, GINGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7260 BRIARCLIFF RD  
 City FORT MYERS State FL Zip Code 33912-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DOUGLAS E MILSAP DDS Occupation (for Individual) DENTAL OFFICE MANAGER  
 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  
 07 / 20 / 2016  
**Transaction ID : SA11AI.19200**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1730.00
<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 102 OF 258
	<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)  
**American Horizons PAC**

**A. MITCHELL, FABIUS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2135 THRIFT RD  
 City CHARLOTTE State NC Zip Code 28208-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BAKER MITCHELL CO Occupation (for Individual) OWNER WHOLESALE PLUMBING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : SA11AI.6457**  
 Amount of Each Receipt this Period 255.00  
 Memo Item

**B. MOIREZ, GUY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 ST NICHOLAS ROAD  
 City DARIEN State CT Zip Code 06820-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) SERVICE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.4906**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

**C. Momah, Clement, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O Box 5055  
 City Laurel State MD Zip Code 20726-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6458**  
 Amount of Each Receipt this Period 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1385.00
<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 103 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MONTALBANO, CHRIS, , ,**

Mailing Address 4 JOHN ST

City MASSAPEQUA	State NY	Zip Code 11758-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

**Transaction ID : SA11AI.12498**

Amount of Each Receipt this Period  
515.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MOORE, JEFF, , ,**

Mailing Address 13366 ALICIA PARKWAY

City REDDING	State CA	Zip Code 96003-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MOORE & PASCARELLA	Occupation (for Individual) DENTIST
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

**Transaction ID : SA11AI.28527**

Amount of Each Receipt this Period  
265.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MOORE, KYRA, , ,**

Mailing Address 103 WEBB DRIVE

City MOREHEAD CITY	State NC	Zip Code 28557-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) HOUSEWIFE
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

**Transaction ID : SA11AI.12222**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1080.00
<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 104 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MOORE, SHERRI, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2016
Mailing Address 337 VIA LIDO SOUD		<b>Transaction ID : SA11AI.12560</b>
City NEWPORT BEACH	State CA	Zip Code 92663-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer (for Individual) ATI	Occupation (for Individual) CONTRACTOR	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MORICI, HERBERT, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 24 / 2016
Mailing Address 4343 WEST ROYAL LANE SUITE 120		<b>Transaction ID : SA11AI.20244</b>
City IRVING	State TX	Zip Code 75063-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer (for Individual) RETIRE	Occupation (for Individual) RETIRE	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MORRAL, ANNA, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 25 / 2016
Mailing Address 227 TOWNSEND AVE		<b>Transaction ID : SA11AI.31673</b>
City BROOKLYN	State MD	Zip Code 21225-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) LEIDOS	Occupation (for Individual) INTELLIGENCE ANALYST	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<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 105 OF 258
	<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)  
**American Horizons PAC**

**A. MORRIS, ROB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1712 WINDERMEREDOWN PL  
 City WINDERMERE State FL Zip Code 34786-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERIPRISE FINANCIAL Occupation (for Individual) PRIVATE WEALTH ADVISOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2016  
**Transaction ID : SA11AI.25907**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. MOSCIA, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 340 MOORE RD.  
 City DOWNINGTOWN State PA Zip Code 19335-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) STONE MASON  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.6280**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

**C. MUELLER, VALERIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 COPPER CT  
 City LONG BEACH State MS Zip Code 39560-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EVENT PLANNER  
 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  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23299**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	980.00
<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 106 OF 258
<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)  
**American Horizons PAC**

**A. Mullen, Teri, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27392 Tumbleweed Tr.

City Valley Center	State CA	Zip Code 92082-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) ARTISTIC ILLUMINATION	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1030.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2016

**Transaction ID : SA11AI.5903**

Amount of Each Receipt this Period  
765.00

Memo Item

**B. MUNDELL, THOMAS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12587 GIST RD

City BRIDGETON	State MO	Zip Code 63044-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) MIKITARY
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2016

**Transaction ID : SA11AI.11965**

Amount of Each Receipt this Period  
265.00

Memo Item

**C. MURDOCK, CHRISTOPHER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 314 COUNTY ROAD 614

City JACKSON	State MO	Zip Code 63755-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CAPE RADIOLOGY GROUP	Occupation (for Individual) RADIOLOGIST
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

**Transaction ID : SA11AI.19983**

Amount of Each Receipt this Period  
515.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1545.00
<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 107 OF 258
	<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)  
**American Horizons PAC**

**A. MURPHY, DONNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13605 E. WESTLAND RD

City SCOTTSDALE	State AZ	Zip Code 85262-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) FLIGHT ATTENDANT
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

**Transaction ID : SA11AI.6242**

Amount of Each Receipt this Period  
215.00

Memo Item

**B. MURPHY, PAUL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 914 FOREST

City WILMETTE	State IL	Zip Code 60091-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1015.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

**Transaction ID : SA11AI.27726**

Amount of Each Receipt this Period  
1015.00

Memo Item

**C. MURPHY, THOMAS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 626 BROADWAY STREET

City NEW HAVEN	State IN	Zip Code 46774-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MURPHY INSURANCE INC.	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.30957**

Amount of Each Receipt this Period  
205.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1435.00
<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 108 OF 258
	<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)  
**American Horizons PAC**

**A. MURPHY, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77 WESTECH PARK

City TYNGSBORO	State MA	Zip Code 01879-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) FURNITURE RESTORATION
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2016

**Transaction ID : SA11AI.5782**

Amount of Each Receipt this Period  
215.00

Memo Item

**B. MURRAY, RAKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 ISLEWORTH LN

City MCKINNEY	State TX	Zip Code 75070-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2016

**Transaction ID : SA11AI.6294**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. NANTZ, JESSICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 FOREST GREEN TRAIL

City KINGWOOD	State TX	Zip Code 77339-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) MDSTRATEGIES INC	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2016

**Transaction ID : SA11AI.31228**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	915.00
<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 109 OF 258
	<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)  
**American Horizons PAC**

**A. NARBONE, LINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 STEEPLE CIRCLE  
 City JUPITER State FL Zip Code 33458-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) A DENTAL ART Occupation (for Individual) DENTIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2016  
**Transaction ID : SA11AI.16889**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. NEEDHAM, NANCEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 CRYSTAL DRIVE 1113  
 City ARLINGTON State VA Zip Code 22202-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) AUDIT EXECUTIVE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2016  
**Transaction ID : SA11AI.9332**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. NELSON, RENESS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 668  
 City TIOGA State ND Zip Code 58852-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.8707**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1430.00
<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 110 OF 258
	<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)  
**American Horizons PAC**

**A. NEWMAN, JAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 LEMANS COURT

City PRAIRIE VILLAGE	State KS	Zip Code 66208-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) UNEMPLOYED
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2016

**Transaction ID : SA11AI.22635**

Amount of Each Receipt this Period  
205.00

Memo Item

**B. NGUYEN, JESSICA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 PEACEFUL GROVE ST

City LAS VEGAS	State NV	Zip Code 89135-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SPRING VALLEY PHARMACY	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1005.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2016

**Transaction ID : SA11AI.15853**

Amount of Each Receipt this Period  
1005.00

Memo Item

**C. NIERENBERG, DONNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37015 N DREAM STREET

City CAREFREE	State AZ	Zip Code 85377-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) DOCTORS WIFE
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2016

**Transaction ID : SA11AI.10108**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1475.00
<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 111 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. NUNN, DEBORAH JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 KELLY RD  
 City APEX State NC Zip Code 27523-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : SA11AI.15122**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. O'BRIEN, SEAN J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11941 WESTMINSTER AVE  
 City LOS ANGELES State CA Zip Code 90066-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) LOCATION MANAGER (LOCAL 399)  
 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  
 07 / 27 / 2016  
**Transaction ID : SA11AI.24998**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. O'REILLY, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70-26 88 STREET  
 City GLENDALE State NY Zip Code 11385-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YERMANS IRISH PUB Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2016  
**Transaction ID : SA11AI.15709**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1080.00
<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 112 OF 258
	<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)  
**American Horizons PAC**

**A. OUELLETTE, BETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 HAYFIELD LANE

City GREER	State SC	Zip Code 29650-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE OUELLETTE GROUP	Occupation (for Individual) MANAGEMENT STRATEGIST
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

**Transaction ID : SA11AI.26223**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. OVERTON, GRETCHEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 WALNUT ST. #10800

City GREEN COVE SPRINGS	State FL	Zip Code 32043-0000
----------------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

**Transaction ID : SA11AI.5790**

Amount of Each Receipt this Period  
315.00

Memo Item

**C. OWEN, ANNE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 BAL HARBOR LANE

City BULLARD	State TX	Zip Code 75757-0000
-----------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

**Transaction ID : SA11AI.30775**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	780.00
<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 113 OF 258
<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)  
**American Horizons PAC**

**A. PALLEGGI, RENEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9663 SANTA MONICA BLVD  
 City BEVERLY HILLS State CA Zip Code 90210-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CASTELLO VAL DI COLLE Occupation (for Individual) OWNER-HOTEL  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : SA11AI.29058**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**B. PARDEE, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 307 PEDEN ST  
 City HOUSTON State TX Zip Code 77006-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21247**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. PARKS, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1350 W. 23RD ST.  
 City TEMPE State AZ Zip Code 85282-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNOLOGY COMPANY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2016  
**Transaction ID : SA11AI.26869**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2295.00
<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 114 OF 258
	<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)  
**American Horizons PAC**

**A. PAULSEN, PHYLLIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12486 VISTA PANORAMA  
 City SANTA ANA State CA Zip Code 92705-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROWN CAPITAL SECURITIES LLP Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2016  
**Transaction ID : SA11AI.10234**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. PENTECOST, KYLER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7730 CAMDEN HARBOUR DR  
 City BRADENTON State FL Zip Code 34212-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24041**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. PERRIN, ANNETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4040 ELLEN DR.  
 City MARRERO State LA Zip Code 70072-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BUDGET IRONWORKS Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2016  
**Transaction ID : SA11AI.30905**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1280.00
<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 115 OF 258
<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)  
**American Horizons PAC**

**A. PERRY, DONALD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7205 SUNBREEZE LANE

City SACRAMENTO	State CA	Zip Code 95828-0000
--------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

**Transaction ID : SA11AI.7592**

Amount of Each Receipt this Period  
400.00

Memo Item

**B. PERRY, FRANKLIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 311 W SPAZIER AVE

City BURBANK	State CA	Zip Code 91506-0000
-----------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2016

**Transaction ID : SA11AI.31634**

Amount of Each Receipt this Period  
215.00

Memo Item

**C. PERRYMAN, JUDY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 265 BLANKS ROAD

City TIOGA	State TX	Zip Code 76271-0000
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

**Transaction ID : SA11AI.19088**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	880.00
<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 116 OF 258
	<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)  
**American Horizons PAC**

**A. PHILIPS, MARSHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1904 METAIRIE HEIGHTS AVE  
 City METAIRIE State LA Zip Code 70001-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PSYCHOLOGIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2016  
**Transaction ID : SA11AI.30452**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. PICKARD, EDUARDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4619 WENTE CT.  
 City OAKLEY State CA Zip Code 94561-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) JEWELER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 03 / 2016  
**Transaction ID : SA11AI.9825**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. PIERCE, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 110 POINCIANA LN  
 City LARGO State FL Zip Code 33770-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2016  
**Transaction ID : SA11AI.12792**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	745.00
<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 117 OF 258
	<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)  
**American Horizons PAC**

**A. PIGHINI, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9600 T PAT RD

City SPOTSYLVANIA	State VA	Zip Code 22551-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAF RETIRED	Occupation (for Individual) HORSE TRANIER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

**Transaction ID : SA11AI.8715**

Amount of Each Receipt this Period  
265.00

Memo Item

**B. PIPPIN, KEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 LITTLE VINE RD

City HILLSVILLE	State VA	Zip Code 24343-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAROLINA SOUTHERN RAILROAD	Occupation (for Individual) PRESIDENT
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

**Transaction ID : SA11AI.21936**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. Piron, Gilles, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 831 East 5th street

City Crowley	State LA	Zip Code 70526-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Gate	Occupation (for Individual) Consulting engineer
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

**Transaction ID : SA11AI.7402**

Amount of Each Receipt this Period  
1015.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2780.00
<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 118 OF 258
	<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)  
**American Horizons PAC**

**A. PISCIOTTA, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7273 SE MAGELLAN LN  
 City STUART State FL Zip Code 34997-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WIRELESS TELECOM SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2016  
**Transaction ID : SA11AI.8828**  
 Amount of Each Receipt this Period  
 220.00  
 Memo Item

**B. POGOGEFF, HELEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 HORIZON ROAD  
 City FORT LEE State NJ Zip Code 07024-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) ON DISABILITY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2016  
**Transaction ID : SA11AI.9641**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. POOL, TRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17216 NORTH LAKE HILLS  
 City LEANDER State TX Zip Code 78645-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TWISTED RANCH WEDDINGS Occupation (for Individual) OWNER OF WEDDING VENUE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.22433**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	685.00
<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 119 OF 258
	<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)  
**American Horizons PAC**

**A. PORRAS, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9960 NW 45 ST  
 City POMPANO BEACH State FL Zip Code 33065-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IVO D PESTANA Occupation (for Individual) REGISTERED NURSE  
 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  
 07 / 28 / 2016  
**Transaction ID : SA11AI.26285**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. POWERS, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 WAVERLY PLACE  
 City LEBANON State TN Zip Code 37087-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COMMERCIAL REALTY SERVICES Occupation (for Individual) REAL ESTATE DEVELOPER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.14663**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. POZZIE., FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5421 26TH ST W  
 City BRADENTON State FL Zip Code 34207-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HANDYMAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2016  
**Transaction ID : SA11AI.9827**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	815.00
<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 120 OF 258
	<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)  
**American Horizons PAC**

**A. PRICE, CHARLOTTE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 WILLIAMS PLACE

City SEQUIM State WA Zip Code 98382-0000

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
07 / 13 / 2016  
Transaction ID : SA11AI.17017

Amount of Each Receipt this Period  
265.00

Memo Item

**B. PRITCHETT, ELISABETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12025 FARNBOROUGH RD

City HUNTERSVILLE State NC Zip Code 28078-0000

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

Name of Employer (for Individual) INTELLIVISION INC. Occupation (for Individual) AWARD WINNING INFOMERCIAL PR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
07 / 22 / 2016  
Transaction ID : SA11AI.20406

Amount of Each Receipt this Period  
265.00

Memo Item

**C. PUCCI, JENNY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7726 OLD CHANNEL TRL

City MONTAGUE State MI Zip Code 49437-0000

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

Name of Employer (for Individual) STANLEY STEEMER GREAT LAKES Occupation (for Individual) OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
09 / 29 / 2016  
Transaction ID : SA11AI.8391

Amount of Each Receipt this Period  
215.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 745.00

**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 121 OF 258
	<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)  
**American Horizons PAC**

**A. PUFFER, SCOTT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8245 S 77TH STREET

City FRANKLIN	State WI	Zip Code 53132-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) HALES CORNERS HEATING	Occupation (for Individual) OWNER
--	--------------------------------------

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
07		07		2016

**Transaction ID : SA11AI.10683**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. QUINN, LISA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5221 STARWIND POINTE

City HERMITAGE	State TN	Zip Code 37076-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) RETAIL
---	---------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

**Transaction ID : SA11AI.12584**

Amount of Each Receipt this Period  
215.00

Memo Item

**C. R, GARY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 291 LE POMAR TERRACE

City FREMONT	State CA	Zip Code 94536-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SAN RAMON VALLEY FIRE DISTRICT	Occupation (for Individual) FIREMAN
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

**Transaction ID : SA11AI.20545**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1480.00
<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 122 OF 258
<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)  
**American Horizons PAC**

**A. RAJOTTE, RICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 858 VIRGINIA LANE  
 City MOUNT PLEASANT State TX Zip Code 75455-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) N/A  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.29570**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. READIE, CHERI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 WINTERS RD  
 City BUTLER State PA Zip Code 16001-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL-ESTATE INVESTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.5949**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**C. REEVES, JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P. O. BOX 1363  
 City MUSKOGEE State OK Zip Code 74402-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) OIL & GAS  
 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  
 08 / 03 / 2016  
**Transaction ID : SA11AI.29356**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<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 123 OF 258
	<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)  
**American Horizons PAC**

**A. REISS, UZZI, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 414 NORTH CAMDEN SUIT 750

City BEVERLY HILLS	State CA	Zip Code 90210-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) MD-ANTI AGING MEDICINE
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2016

**Transaction ID : SA11AI.14609**

Amount of Each Receipt this Period  
750.00

Memo Item

**B. RICHARD, DR, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 SKYLINE DRIVE

City LAKEWOOD	State NJ	Zip Code 08701-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) SETON HALL UNIVERSITY	Occupation (for Individual) PROFESSOR
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2016

**Transaction ID : SA11AI.27115**

Amount of Each Receipt this Period  
265.00

Memo Item

**C. RIEGER, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5106 WHISTLERS BEND WAY

City EL DORADO HILLS	State CA	Zip Code 95762-0000
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF AND DOLAN AUTO GROUP	Occupation (for Individual) AUTO DEALER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2016

**Transaction ID : SA11AI.28118**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1280.00
<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 124 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. RIEKE, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37750 W 95TH STREET  
 City EUDORA State KS Zip Code 66025-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BL RIEKE & ASSOC INC Occupation (for Individual) HOME BUILDER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20511**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. ROBERTSON, COLBY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 644 RIDGEVIEW LANE  
 City POPLAR BLUFF State MO Zip Code 63901-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBERTSON CONTRACTORS Occupation (for Individual) CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.17666**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. ROBERTSON, DARRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10270 BURGESS RD.  
 City COLORADO SPRINGS State CO Zip Code 80908-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) ANIMAL RESCUE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2016  
**Transaction ID : SA11AI.20094**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1595.00
<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 125 OF 258
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. ROBINSON, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2095 LAKESIDE DRIVE  
 City TOBYHANNA State PA Zip Code 18466-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) OWNER DAYCARE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6516**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. ROBISON, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1327  
 City SCAPPOOSE State OR Zip Code 97056-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) VETERINARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2016  
**Transaction ID : SA11AI.21213**  
 Amount of Each Receipt this Period  
 765.00  
 Memo Item

**C. RODY, PATTI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10115 E. HAPPY HOLLOW DRIVE  
 City SCOTTSDALE State AZ Zip Code 85262-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF HEAVY CONSTRUCTION CO. Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 19 / 2016  
**Transaction ID : SA11AI.20017**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1195.00
<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:	PAGE 126 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. ROEHLER, DONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P. O. BOX 161  
 City SOUTH RIVER State NJ Zip Code 08882-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.7269**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. ROETZEL, KEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1960 CAMINO LOMA VERDE  
 City VISTA State CA Zip Code 92084-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED SCHOOL ADMINISTRATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25719**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. RONEY, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 GRAYSON CIRCLE  
 City UNION CITY State TN Zip Code 38261-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J.R'S AUTO SALES Occupation (for Individual) OWNER OF DEALERSHIPS  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 09 / 2016  
**Transaction ID : SA11AI.13571**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	965.00
<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 127 OF 258
	<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)  
**American Horizons PAC**

**A. RUSSELL, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 311 TRACEY DRIVE  
 City STANLEY State VA Zip Code 22851-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ORACLE Occupation (for Individual) MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.7548**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. RYAN, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 CARRIAGE RD  
 City FORT COLLIND State CO Zip Code 80625-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25643**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. RYAN, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 97 SANDWICH ROAD  
 City PLYMOUTH State MA Zip Code 02360-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ABLE RESTORATION INC Occupation (for Individual) DISASTER MITIGATION  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6540**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	965.00
<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:	PAGE 128 OF 258
	(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)  
**American Horizons PAC**

**A. S, NANCY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 NE 28TH ST LIGHTHOUSE POINT

City POMPANO BEACH	State FL	Zip Code 33064-0000
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) HOUSEWIFE
--	--

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
07		03		2016

**Transaction ID : SA11AI.9748**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. SABLATURA, CHARLES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1701

City HELOTES	State TX	Zip Code 78023-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CHICKY TACKLE COMPANY LLC	Occupation (for Individual) OWNER
--	--------------------------------------

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
07		07		2016

**Transaction ID : SA11AI.8385**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. SADLER, TROY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10620 BROWN ROAD

City DENHAM SPRINGS	State LA	Zip Code 70726-0000
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		04		2016

**Transaction ID : SA11AI.4886**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	515.00
<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 129 OF 258
	<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)  
**American Horizons PAC**

**A. SANDERS, VANCE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5537 SOUTH MOBILE STREET

City AURORA	State CO	Zip Code 80015-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) EQUINOX FUND MANAGEMENT LLC	Occupation (for Individual) CHIEF FINANCIAL OFFICER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

**Transaction ID : SA11AI.31041**

Amount of Each Receipt this Period  
215.00

Memo Item

**B. SARNA, DANIEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 CASTILE STREET

City VALLEJO	State CA	Zip Code 94591-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CITY OF VALLEJO	Occupation (for Individual) FIREFIGHTER
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

**Transaction ID : SA11AI.8159**

Amount of Each Receipt this Period  
300.00

Memo Item

**C. SAWASKY, FRITZIE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8224 VIRGINIA CIRCLE

City WATERFORD	State WI	Zip Code 53185-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) D&E ELECTRIC LLC	Occupation (for Individual) OFFICE MANAGER/SPOUSE OF OWN
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

**Transaction ID : SA11AI.18228**

Amount of Each Receipt this Period  
265.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	780.00
<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 130 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. SCHAEFER, JOHN/PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4111 AUGUSTA POINT DRIVE  
 City SENECA State SC Zip Code 29672-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21255**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. SCHANTZ, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 SPRING ST  
 City FAYETTEVILLE State NC Zip Code 28305-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALL AMERICAN HOME RENOVATIONS Occupation (for Individual) RENOVATING HOMES FOR DISABLE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.17668**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. SCHEIDEMAN, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1313 WASHINGTON TERRACE  
 City FORT WORTH State TX Zip Code 76107-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) UNEMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2016  
**Transaction ID : SA11AI.9758**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<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 131 OF 258
	<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)  
**American Horizons PAC**

**A. SCHOONOVER, PAMELA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 TEXAS STREET SUITE 2230

City SHREVEPORT	State LA	Zip Code 71101-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SCHOONOVER INVESTMENTS	Occupation (for Individual) PARTNER
---	--

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
08		04		2016

**Transaction ID : SA11AI.10413**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. SCHULZE, MITCHELL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7045 CLOVERDALE LANE

City COLUMBUS	State OH	Zip Code 43235-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) MYSELF	Occupation (for Individual) COST SEGREGATION ENGINEER
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

**Transaction ID : SA11AI.29598**

Amount of Each Receipt this Period  
215.00

Memo Item

**C. SCHUMACHER, DIRK, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23585 SYCAMORE CREEK

City MURRIETA	State CA	Zip Code 92562-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) TDS-HEAT-SOLUTIONS-INC.	Occupation (for Individual) CO OWNER
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : SA11AI.27508**

Amount of Each Receipt this Period  
215.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1430.00
<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 132 OF 258
<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)  
**American Horizons PAC**

**A. SCHWEIGER, CANDACE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5340 SW 8TH COURT  
 City CAPE CORAL State FL Zip Code 33914-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 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  
 08 / 02 / 2016  
**Transaction ID : SA11AI.6626**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. SCIANNA, PAULA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16931 SEMINOLE RIDGE DRIVE  
 City CYPRESS State TX Zip Code 77433-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.10817**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. SERENO, EDGEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10001 COLEBROOK AVE  
 City POTOMAC State MD Zip Code 20854-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) MATHEMATICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27406**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1530.00
<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 133 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. SESSA, FRANCES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 SHADY ACRES RD  
 City DARIEN State CT Zip Code 06820-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RET Occupation (for Individual) RET  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : SA11AI.5297**  
 Amount of Each Receipt this Period  
 220.00  
 Memo Item

**B. SHAFER, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2618 163RD PLACE EAST  
 City PARRISH State FL Zip Code 34219-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SCR PRECISION TUBE BENDING INC. Occupation (for Individual) OWNER/PRESIDENT/MANUFACTURI  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20783**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. SHORTER, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2525 S. LEONINE RD  
 City WICHITA State KS Zip Code 67217-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INTEGRATED COMPONENTS INC Occupation (for Individual) OWNER  
 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  
 07 / 28 / 2016  
**Transaction ID : SA11AI.26043**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2235.00
<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:	PAGE 134 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. SICARI, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25439 N 89TH ST  
 City SCOTTSDALE State AZ Zip Code 85255-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARAGON Occupation (for Individual) PRESIDENT & CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27420**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. SIMANDLE, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 778 N REFUGIO RD  
 City SANTA YNEZ State CA Zip Code 93460-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.5925**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. SIMPSON, SYLVIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10325 CHRISTINE PLACE  
 City CHATSWORTH State CA Zip Code 91311-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) EDUCATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2016  
**Transaction ID : SA11AI.19020**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1115.00
<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 135 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SIMPSON-JONES, SHERYL, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 12 / 2016
Mailing Address 1013 LEGACY HILLS DR		<b>Transaction ID : SA11AI.31115</b>
City MCDONOUGH	State GA	Zip Code 30253-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) WHS	Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SIRGO, KAY, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2016
Mailing Address PO BOX 3805		<b>Transaction ID : SA11AI.18751</b>
City MIDLAND	State TX	Zip Code 79702-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SKARA, NICK, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 09 / 2016
Mailing Address 21 WESCOTT STREET		<b>Transaction ID : SA11AI.30563</b>
City RIVERSIDE	State CT	Zip Code 06878-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 515.00
Name of Employer (for Individual) CT SPORTS ENTERPRISE	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1230.00
<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 136 OF 258
	<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)  
**American Horizons PAC**

**A. SLOAN, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8300 NORTH FM 620 BUILDING K100  
 City AUSTIN State TX Zip Code 78726-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS  
 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  
 07 / 14 / 2016  
**Transaction ID : SA11AI.17474**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. SMITH, ANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2117 OAKHURST DR  
 City WINTER HAVEN State FL Zip Code 33881-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED USAF Occupation (for Individual) MINISTER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2016  
**Transaction ID : SA11AI.29450**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. SMITH, DAWN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5602 NW 62ND AVE  
 City OCALA State FL Zip Code 34482-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LEGAL CONSULTANT  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25022**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	780.00
<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 137 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SMITH, MARSHA, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2016 <b>Transaction ID : SA11AI.16855</b>
Mailing Address 2322 NW 26TH PL		Amount of Each Receipt this Period 300.00
City CAPE CORAL	State FL	Zip Code 33993-0000
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SMITH, MICHELLE, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 22 / 2016 <b>Transaction ID : SA11AI.8713</b>
Mailing Address 15815 GLEN UNA DR.		Amount of Each Receipt this Period 250.00
City LOS GATOS	State CA	Zip Code 95030-0000
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) HUSBAND	Occupation (for Individual) HOMEMAKER	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SNOW, MARTHA, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 20 / 2016 <b>Transaction ID : SA11AI.19505</b>
Mailing Address 123 S. 8TH ST.		Amount of Each Receipt this Period 250.00
City HAMILTON	State MT	Zip Code 59840-0000
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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 138 OF 258
	<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)  
**American Horizons PAC**

**A. SOLER, JOSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12107 NW 10 MNR  
 City CORAL SPRINGS State FL Zip Code 33071-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6756**  
 Amount of Each Receipt this Period  
 415.00  
 Memo Item

**B. SONDRINI, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 PEPPER ROAD  
 City FITCHBURG State MA Zip Code 01420-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEALTHALLIANCE HOSPITAL Occupation (for Individual) CLINICAL SCIENTIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.7125**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. SPANGLER III, ARCHIE V, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7927 TWIN ORCHARD CT  
 City INDIANAPOLIS State IN Zip Code 46239-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CONRAD INDIANAPOLIS (HILTON) Occupation (for Individual) SECURITY OFFICER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 14 / 2016  
**Transaction ID : SA11AI.30356**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	830.00
<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 139 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. SPEARS, DOYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7920 FAWNDALE WAY  
 City ATLANTA State GA Zip Code 30350-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SEMI RETIRED Occupation (for Individual) REAL ESTATE FINANCE CONSULTIN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2016  
**Transaction ID : SA11AI.18855**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. SPRINGBERG, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5045 RIVEDRO ST.  
 City LAS VEGAS State NV Zip Code 89135-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.18897**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. STACEY, SEVINOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 SEVINOR RD  
 City LYNNFIELD State MA Zip Code 01940-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WAYNE ALARM Occupation (for Individual) PARTY PLANNER  
 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  
 07 / 02 / 2016  
**Transaction ID : SA11AI.7051**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1565.00
<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 140 OF 258
	<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)  
**American Horizons PAC**

**A. STARK, BEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 707 W. LD LOCKETT RD  
 City COLLEYVILLE State TX Zip Code 76034-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OUTLOOK TEXAS LP Occupation (for Individual) ENTREPRENEUR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24512**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. STEED, ANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 265 MUSTANG DR.  
 City THOMASVILLE State NC Zip Code 27360-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITY OF HIGH POINT Occupation (for Individual) FIREFIGHTER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2016  
**Transaction ID : SA11AI.31250**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. STEWART, SHANTANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5515 HOWARD LANE  
 City GLOUCESTER State VA Zip Code 23061-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEAL' HUNTING&FISHING SUPPLIES Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2016  
**Transaction ID : SA11AI.18682**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<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 141 OF 258
	<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)  
**American Horizons PAC**

**A. STINSON-WADE, MARIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 ALPAUGH FARM ROAD  
 City LEBANON State NJ Zip Code 08833-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOPIANO KENNY & STINSON Occupation (for Individual) ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.13215**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. STJACQUES, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 489 BLUE HERON CT  
 City WESTERVILLE State OH Zip Code 43082-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EXPRESS Occupation (for Individual) TECHNICAL DESIGNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2016  
**Transaction ID : SA11AI.5583**  
 Amount of Each Receipt this Period  
 240.00  
 Memo Item

**C. STOEVER, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24902 SIENNA TERRACE LN  
 City KATY State TX Zip Code 77494-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STOEVER-PARKER ELECTRIC Occupation (for Individual) CONTRACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.6608**  
 Amount of Each Receipt this Period  
 405.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	910.00
<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 142 OF 258
	<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)  
**American Horizons PAC**

**A. STRYDESKY, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1178 WATERWAY LANE  
 City MYRTLE BEACH State SC Zip Code 29572-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYMENT Occupation (for Individual) ARTIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.18885**  
 Amount of Each Receipt this Period  
 269.00  
 Memo Item

**B. STUCKER, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8312 N GOLF DR  
 City PARADISE VALLEY State AZ Zip Code 85253-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE INVESTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2016  
**Transaction ID : SA11AI.7630**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item

**C. STUMP, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4708 LONGMONT RD  
 City VA BCHVA State VA Zip Code 23456-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SURFACE TECHNOLOGIES CORP Occupation (for Individual) VICE PRES DOD CONTACTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.17578**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	759.00
<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 143 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. STURGIS-VIBORG, DEBBIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2775 SANTA RITA RD  
 City TEMPLETON State CA Zip Code 93465-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF -VIBORG SAND & GRAVEL Occupation (for Individual) GENERAL ENGINEERING CONTRAC  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2016  
**Transaction ID : SA11AI.8465**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. SUE, CORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 53 TUSCAN VILLA CIRCLE  
 City LUBBOCK State TX Zip Code 79423-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) FARMER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.12061**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. SULLIVAN, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28202 CABOT RD STE 155  
 City LAGUNA NIGUEL State CA Zip Code 92677-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACTIVEPDF INC. Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14557**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1045.00
<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 144 OF 258
	<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)  
**American Horizons PAC**

**A. SWANEY, CATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7000 MORGANSHIRE COURT  
 City SUMMERFIELD State NC Zip Code 28358-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 PIEDMONT TRIAD FAMILY MEDICINE PHYSICIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2016  
**Transaction ID : SA11AI.27759**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. SWEENEY, SANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4910 RIVER FARM ROAD NE  
 City MARIETTA State GA Zip Code 30068-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 HEADWATERS GROUP IT CONSULTING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2016  
**Transaction ID : SA11AI.17888**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. T., JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10329 HICKORY FOREST DRIVE  
 City OAKTON State VA Zip Code 22124-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 FEDERAL LABOR RELATIONS AUTHORITY CHIEF COUNSEL  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 555.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2016  
**Transaction ID : SA11AI.31386**  
 Amount of Each Receipt this Period  
 555.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1035.00
<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 145 OF 258
	<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)  
**American Horizons PAC**

**A. T. GHOSTINE, ELIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6292 VIA VENETIA N  
 City DELRAY BEACH State FL Zip Code 33484-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRAVEL AND TOURISM  
 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  
 07 / 24 / 2016  
**Transaction ID : SA11AI.23086**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. TAGGART, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1810  
 City CODY State WY Zip Code 82414-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FURNITURE MAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 05 / 2016  
**Transaction ID : SA11AI.30190**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. TAISHOFF, ROB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5025 CASTELLO RD SUITE 203  
 City NAPLES State FL Zip Code 34103-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US NAVY RETIRED Occupation (for Individual) NAVAL OFFICER/ATTORNEY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : SA11AI.15154**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<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 146 OF 258
	<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)  
**American Horizons PAC**

**A. TAYLOR, MARY ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1019 CEDAR GLEN DR  
 City DELAND State FL Zip Code 32724-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2016  
**Transaction ID : SA11AI.31716**  
 Amount of Each Receipt this Period  
 205.00  
 Memo Item

**B. TAYLOR, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9087 S W I-10 FRONTAGE RD  
 City SEALY State TX Zip Code 77474-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CEO TRUCKING CO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2016  
**Transaction ID : SA11AI.7157**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. TEMPLET, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40300 ABBY JAMES RD.  
 City PRAIRIEVILLE State LA Zip Code 70769-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MMR GROUP BTR Occupation (for Individual) CONSTRUCTION MGMT.  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.20485**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	970.00
<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 147 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. THARP, JESSE, , ,</b>		Date of Receipt
Mailing Address 780 WEST MAIN STREET		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2016"/>
City HENDERSONVILLE	State TN	Zip Code 37075-0000
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.5507</b>
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) RETIRED
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. THOMAS, DEANNAH LYNN, , ,</b>		Date of Receipt
Mailing Address 3126 BOGIE CT SW		<input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2016"/>
City SUPPLY	State NC	Zip Code 28462-0000
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.16610</b>
Name of Employer (for Individual) DISABLED		Occupation (for Individual) DISABLED
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="430.00"/>	Amount of Each Receipt this Period <input type="text" value="430.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. THOMAS, LORA, , ,</b>		Date of Receipt
Mailing Address 748 MOKAPU RD		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City KAILUA	State HI	Zip Code 96734-0000
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.24373</b>
Name of Employer (for Individual) INDEPENDENT CONTRACTOR		Occupation (for Individual) KYANI DISTRIBUTOR
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="515.00"/>	Amount of Each Receipt this Period <input type="text" value="515.00"/>
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1245.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 148 OF 258
	<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)  
**American Horizons PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. THOMPSON, JORDAN, , ,**

Mailing Address **672 92ND AVE N.**

City <b>NAPLES</b>	State <b>FL</b>	Zip Code <b>34108-0000</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>TRU-LINE PLUMBING INC.</b>	Occupation (for Individual) <b>OWNER</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 22 / 2016**

**Transaction ID : SA11AI.21365**

Amount of Each Receipt this Period  
**265.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TOWE, PEBBLE, , ,**

Mailing Address **279 EARL NORTH ROAD**

City <b>NEWNAN</b>	State <b>GA</b>	Zip Code <b>30263-0000</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>BROOKS CONSTRUCTION</b>	Occupation (for Individual) <b>POURED FOUNDATIONS</b>
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 11 / 2016**

**Transaction ID : SA11AI.15545**

Amount of Each Receipt this Period  
**265.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TRINCHESE, LUIGI, , ,**

Mailing Address **16447 86TH**

City <b>HOWARD BEACH</b>	State <b>NY</b>	Zip Code <b>11414-0000</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>CONSTRUCTION/FIRE RESTORATION</b>
--	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**265.00**

Date of Receipt  
**07 / 09 / 2016**

**Transaction ID : SA11AI.14107**

Amount of Each Receipt this Period  
**265.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>795.00</b>
<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 149 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. TRIPLETT, JANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 409 GLEN ARBOR LN.  
 City LEESBURG State FL Zip Code 34748-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FORD MOTOR CO. Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.27192**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. ULANDER, LISA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1985 SUMMIT RIDGE ROAD  
 City FLEMING ISLAND State FL Zip Code 32003-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USI FIRST CHOICE Occupation (for Individual) BRANCH MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2016  
**Transaction ID : SA11AI.27236**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. UNIS, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11831 COLONY DR.  
 City SANTA ANA State CA Zip Code 92705-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWYER/BUSINESSMAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.18368**  
 Amount of Each Receipt this Period  
 575.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1140.00
<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 150 OF 258
	<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)  
**American Horizons PAC**

**A. VAN, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1652 EAST 88TH STREET

City NEWAYGO	State MI	Zip Code 49337-0000
-----------------	-------------	------------------------

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

Name of Employer (for Individual) GELOCK TRANSFER LINE	Occupation (for Individual) SALES ESTIMATOR
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

**Transaction ID : SA11AI.6098**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. VARVEL, TODD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 BURNSIDE DRIVE

City TIPP CITY	State OH	Zip Code 45371-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ADVOCARE	Occupation (for Individual) DIRECT SALES
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

**Transaction ID : SA11AI.8397**

Amount of Each Receipt this Period  
315.00

Memo Item

**C. VASSALLO, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4304 ABITARE BLVD

City VOORHEES	State NJ	Zip Code 08043-0000
------------------	-------------	------------------------

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

Name of Employer (for Individual) LEADER SETTLEMENT SERVICES	Occupation (for Individual) LAWYER
---	---------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

**Transaction ID : SA11AI.28509**

Amount of Each Receipt this Period  
415.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1230.00
<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:	PAGE 151 OF 258
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. VILLEGAS, AVI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 N. PINE AVE  
 City ARLINGTON HEIGHTS State IL Zip Code 60004-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARCOS ENVIRONMENTAL Occupation (for Individual) SAFETY MANAGER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.27400**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

**B. VOLLKOMMER, KELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6843 AMBER ST  
 City HIGHLAND State CA Zip Code 92346-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) MANAGEMENT PREVIOUSLY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2016  
**Transaction ID : SA11AI.9142**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. W, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2912 SPELL RD  
 City VINTON State LA Zip Code 70668-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CATTLE N REAL ESTATE  
 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  
 07 / 07 / 2016  
**Transaction ID : SA11AI.11489**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1580.00
<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 152 OF 258
	<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)  
**American Horizons PAC**

**A. WAGNER, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 SPRUCE STREET SUITE 200  
 City RIVERSIDE State CA Zip Code 92507-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY  
 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  
 07 / 08 / 2016  
**Transaction ID : SA11AI.7550**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. WAGNER, JULIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11676 EMERSON RD  
 City VAN WERT State OH Zip Code 45891-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2016  
**Transaction ID : SA11AI.31266**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**C. WALKER, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 137003  
 City FORT WORTH State TX Zip Code 76136-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTRAL CONCRETE PUMPING Occupation (for Individual) GM  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23607**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<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 153 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. WALL, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 LAKE FOREST DR SW  
 City PINEHURST State NC Zip Code 28374-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2016  
**Transaction ID : SA11AI.11063**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. WALLER, GLENDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 BEAN AVE.  
 City KILGORE State TX Zip Code 75662-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WALLER'S WELDING SERVICE Occupation (for Individual) OWNER - WELDER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.5501**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. WALTERS, BOB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5145 RANCHITA CANYON RD  
 City SAN MIGUEL State CA Zip Code 93451-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : SA11AI.16237**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	680.00
<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 154 OF 258
	<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)  
**American Horizons PAC**

**A. WARWICK, TIFFANY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27351 SHADY HILLS LANDING LANE  
 City SPRING State TX Zip Code 77386-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PROPERTY MANAGER Occupation (for Individual) SELF EMPLOYED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12646**  
 Amount of Each Receipt this Period  
 515.00  
 Memo Item

**B. WATERS, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 HEATHLAND WAY  
 City MOUNT PLEASANT State SC Zip Code 29466-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SWIFT & HOLLAND LLC Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2016  
**Transaction ID : SA11AI.7783**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

**C. WAY, CANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 COTTAGE ROAD  
 City NEWBURY State MA Zip Code 01951-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.8082**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1010.00
<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 155 OF 258
	<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)  
**American Horizons PAC**

**A. WAY, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12731 BRIAR HARBOR DR  
 City TOMBALL State TX Zip Code 77377-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JACOBS Occupation (for Individual) ENGINEERING DESIGNER  
 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  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21962**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. WEAVER, JOAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3446 OLD SALEM ROAD  
 City PAMPLICO State SC Zip Code 29583-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) L DEAN WEAVER CO LLC Occupation (for Individual) HIGHWAY/HEAVY CONSTRUCTION  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2016  
**Transaction ID : SA11AI.31232**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. WESSON, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9408 PALENCIA CT  
 City FORT WORTH State TX Zip Code 76126-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEODYNAMICS Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2016  
**Transaction ID : SA11AI.18434**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1465.00
<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 156 OF 258
	<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)  
**American Horizons PAC**

**A. WEST, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 188 SAWTOOTH OAK DR  
 City JEFFERSON State GA Zip Code 30549-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR  
 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  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14981**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. WESTERVELT, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 ADAMS STREET  
 City WINSTED State CT Zip Code 06098-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WESTWOOD PRODUCTS Occupation (for Individual) SECRETARY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : SA11AI.11003**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. WHEELER, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2300 NORTH 8TH STREET  
 City FORT SMITH State AR Zip Code 72904-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOMEMAKER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2016  
**Transaction ID : SA11AI.20825**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	815.00
<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 157 OF 258
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. WHEELER, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 REDCLIFFE ROAD

City GREENVILLE	State SC	Zip Code 29615-0000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RESTORATION SERVICES OF THE CAROLINAS	Occupation (for Individual) PRESIDENT
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

**Transaction ID : SA11AI.31499**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. WHITLEY, BARBARA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6708 SANDFIELD CT

City FAYETTEVILLE	State NC	Zip Code 28304-0000
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) COUNSELOR
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

**Transaction ID : SA11AI.7618**

Amount of Each Receipt this Period  
215.00

Memo Item

**C. WICK, DONNA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2211 RAYFORD ROAD 111-44

City SPRING	State TX	Zip Code 77386-0000
----------------	-------------	------------------------

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

Name of Employer (for Individual) WICKED PUBLICITY	Occupation (for Individual) PR / PUBLICIST
---	---

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

**Transaction ID : SA11AI.8597**

Amount of Each Receipt this Period  
315.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<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 158 OF 258
	<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)  
**American Horizons PAC**

**A. WILLIAMS, TOMMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1930 GRAYSON OAKS CT  
 City LAWRENCEVILLE State GA Zip Code 30045-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.9464**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**B. WILLIAMSON, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1417 14TH ST. SW  
 City MINOT State ND Zip Code 58701-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHIPPEWA RESOURCES Occupation (for Individual) OIL AND GAS CONSULTING  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 09 / 2016  
**Transaction ID : SA11AI.13471**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. WINTER, EUGENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1324 N. LIBERTY LAKE ROAD #181  
 City LIBERTY LAKE State WA Zip Code 99019-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLD STAR CONSTRUCTION INC. Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 11 / 2016  
**Transaction ID : SA11AI.15395**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	745.00
<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 159 OF 258
	<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)  
**American Horizons PAC**

**A. WITSKEN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11991 FLORIDA ROAD  
 City FORTVILLE State IN Zip Code 46040-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDSCAPER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016  
**Transaction ID : SA11AI.8325**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. WITT, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1117 MAPLEWOOD DR. SW  
 City HARTSELLE State AL Zip Code 35640-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CALHOUN COMMUNITY COLLEGE Occupation (for Individual) ADJUNCT INSTRUCTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.24782**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

**C. WITTER, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 325 TAMPICO ST  
 City IRVING State TX Zip Code 75062-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C. T. AND S. METALWORKS Occupation (for Individual) OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2016  
**Transaction ID : SA11AI.18642**  
 Amount of Each Receipt this Period  
 1015.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2295.00
<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: PAGE 160 OF 258  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. WNOROWSKI, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11307 RIVER KNOLL DR.  
 City JACKSONVILLE State FL Zip Code 32225-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ENERGY CONSULTANT  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2016  
**Transaction ID : SA11AI.22937**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. WOMMACK, JAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3408 PINE  
 City TEXARKANA State TX Zip Code 75503-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VERTICAL ALLIANCE Occupation (for Individual) CEO  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016  
**Transaction ID : SA11AI.27809**  
 Amount of Each Receipt this Period  
 315.00  
 Memo Item

**C. WOODS, VICTORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1725 EAST 15TH STREET  
 City EDMOND State OK Zip Code 73013-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHAPPELWOOD FINANCIAL Occupation (for Individual) BUSINESS OWNER CHIEF INVESTME  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2016  
**Transaction ID : SA11AI.21155**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1115.00  
**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 161 OF 258
	<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)  
**American Horizons PAC**

**A. WOOTEN, GLORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1102 EUCALYPTUS DR  
 City EL CAJON State CA Zip Code 92020-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12678**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. WORTHINGTON, SHELLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13817 RANSOM RD  
 City MOORPARK State CA Zip Code 93021-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TLC HOME HOSPICE Occupation (for Individual) NURSE  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2016  
**Transaction ID : SA11AI.6566**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. WORTHY, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 MOUNTAIN PARK DR  
 City BIG SPRING State TX Zip Code 79720-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) NURSE PRACTITIONER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2016  
**Transaction ID : SA11AI.14569**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	745.00
<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 162 OF 258
	<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)  
**American Horizons PAC**

**A. WRIGHT, LYNNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5908 STOCKDALE HWY #1  
 City BAKERSFIELD State CA Zip Code 93309-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016  
**Transaction ID : SA11AI.23603**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**B. YATES, CHARITY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8177 N STATE ROUTE 134  
 City WILMINGTON State OH Zip Code 45177-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BUSINESS OWNER Occupation (for Individual) INSURANCE AGENCY  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2016  
**Transaction ID : SA11AI.25753**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

**C. Yates, Shari, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 2377  
 City Ruidoso State NM Zip Code 88355-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MYCO IND. INC./ YATES PETROLEUM Occupation (for Individual) VP/ STOCKHOLDER  
 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  
 09 / 29 / 2016  
**Transaction ID : SA11AI.7345**  
 Amount of Each Receipt this Period  
 650.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1180.00
<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:	PAGE 163 OF 258
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. YUSUPOV, OKSANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5621 E GROVERS AVE  
 City SCOTTSDALE State AZ Zip Code 85254-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AZ BRAIN AND SPINE CENTER Occupation (for Individual) CFO  
 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  
 07 / 08 / 2016  
**Transaction ID : SA11AI.12590**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. ZALEWSKI, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1925 GENTLE BLUFF CT  
 City NORTH LAS VEGAS State NV Zip Code 89084-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARDEE Occupation (for Individual) NEW HOME SALES  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2016  
**Transaction ID : SA11AI.7777**  
 Amount of Each Receipt this Period  
 215.00  
 Memo Item

**C. ZARNDT, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2125 LAKE REUNION CT  
 City DECATUR State IL Zip Code 62521-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REMODELING SOLUTIONS Occupation (for Individual) BUSINESS OWNER  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2016  
**Transaction ID : SA11AI.23169**  
 Amount of Each Receipt this Period  
 265.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<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 164 OF 258
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZEISLOFT, CHARLES, , ,**

Mailing Address 1699 CROWN POINT RD

City THOROFARE	State NJ	Zip Code 08086-0000
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ZEISLOFT TRUCKING LLC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
765.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

**Transaction ID : SA11AI.18114**

Amount of Each Receipt this Period  
765.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZEPP, CHUCK, , ,**

Mailing Address 4012 SALEM BOTTOM

City WESTMINSTER	State MD	Zip Code 21157-0000
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) DEVELOPER/REAL ESTATE
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

**Transaction ID : SA11AI.23789**

Amount of Each Receipt this Period  
265.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

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

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
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<b>TOTAL</b> This Period (last page this line number only).....	205534.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32039</b> Amount of Each Disbursement this Period 4.53
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32041</b> Amount of Each Disbursement this Period 745.00
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32042</b> Amount of Each Disbursement this Period 75.49
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		

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

825.02

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32044</b>
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>		Amount of Each Disbursement this Period 3.55
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32046</b>
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>		Amount of Each Disbursement this Period 985.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActiveCampaign, Inc</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address 222 South Riverside Plaza Suite 810		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32047</b>
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement CRM Software	Category/Type 001	
Candidate Name <b>American Horizons PAC</b>		Amount of Each Disbursement this Period 985.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1973.55
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. American ForVetsByVets, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 4023 Kennett Pike #57569		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32156</b>	
City Wilmington	State DE	Zip Code 19087	Amount of Each Disbursement this Period 969.27
Purpose of Disbursement Apparel Design		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name <b>American Horizons PAC</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American ForVetsByVets, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 23 / 2016	
Mailing Address 4023 Kennett Pike #57569		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32157</b>	
City Wilmington	State DE	Zip Code 19087	Amount of Each Disbursement this Period 495.78
Purpose of Disbursement Apparel Merchandise		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name <b>American Horizons PAC</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. American ForVetsByVets, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016	
Mailing Address 4023 Kennett Pike #57569		FEC Identification Number C00619577 <b>Transaction ID : SB21B.32158</b>	
City Wilmington	State DE	Zip Code 19087	Amount of Each Disbursement this Period 585.00
Purpose of Disbursement Apparel Design		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name <b>American Horizons PAC</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

2050.05

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Cartsoft, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2016

Mailing Address 1111 Light St  
4th Floor

FEC Identification Number

C	C00619577
<b>Transaction ID : SB21B.32141</b>	
Amount of Each Disbursement this Period	
50000.00	

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Campaign Strategy Consulting

001
Category/ Type

Candidate Name  
**American Horizons PAC**

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cartsoft, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address 1111 Light St  
4th Floor

FEC Identification Number

C	C00619577
<b>Transaction ID : SB21B.32142</b>	
Amount of Each Disbursement this Period	
12028.59	

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Payment Software Development

001
Category/ Type

Candidate Name  
**American Horizons PAC**

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cartsoft, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2016

Mailing Address 1111 Light St  
4th Floor

FEC Identification Number

C	C00619577
<b>Transaction ID : SB21B.32143</b>	
Amount of Each Disbursement this Period	
50000.00	

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Campaign Strategy Consulting

001
Category/ Type

Candidate Name  
**American Horizons PAC**

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

Memo Item

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

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

112028.59
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Cartsoft, LLC**

Mailing Address 1111 Light St  
4th Floor

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Payment Software Development

Category/  
Type

Candidate Name  
**American Horizons PAC**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32144**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cartsoft, LLC**

Mailing Address 1111 Light St  
4th Floor

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Campaign Strategy Consulting

Category/  
Type

Candidate Name  
**American Horizons PAC**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32145**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cartsoft, LLC**

Mailing Address 1111 Light St  
4th Floor

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
Campaign Strategy Consulting

Category/  
Type

Candidate Name  
**American Horizons PAC**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32146**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Cartsoft, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016
Mailing Address 1111 Light St 4th Floor		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32147</b> Amount of Each Disbursement this Period 50000.00
City Baltimore	State MD	Zip Code 21230
Purpose of Disbursement Campaign Strategy Consulting		Category/ Type 001
Candidate Name <b>American Horizons PAC</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cartsoft, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016
Mailing Address 1111 Light St 4th Floor		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32148</b> Amount of Each Disbursement this Period 50000.00
City Baltimore	State MD	Zip Code 21230
Purpose of Disbursement Campaign Strategy Consulting		Category/ Type 001
Candidate Name <b>American Horizons PAC</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cartsoft, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016
Mailing Address 1111 Light St 4th Floor		FEC Identification Number C 00619577 <b>Transaction ID : SB21B.32149</b> Amount of Each Disbursement this Period 50000.00
City Baltimore	State MD	Zip Code 21230
Purpose of Disbursement Campaign Strategy Consulting		Category/ Type 001
Candidate Name <b>American Horizons PAC</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

150000.00

**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"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31985**  
 Amount of Each Disbursement this Period  
 4898.22

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31986**  
 Amount of Each Disbursement this Period  
 1.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31987**  
 Amount of Each Disbursement this Period  
 5028.67

Memo Item

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

9928.54

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31988  
Amount of Each Disbursement this Period  
13.59

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31989  
Amount of Each Disbursement this Period  
4989.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 04 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31983  
Amount of Each Disbursement this Period  
5017.13

Memo Item

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

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

10020.62

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 04 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31984**  
 Amount of Each Disbursement this Period  
 12.82

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31977**  
 Amount of Each Disbursement this Period  
 31.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31978**  
 Amount of Each Disbursement this Period  
 5037.96

Memo Item

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

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

5082.48

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	6

FEC Identification Number

C [ ]

**Transaction ID : SB21B.31979**

Amount of Each Disbursement this Period

[ ] 12.33

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	6

FEC Identification Number

C [ ]

**Transaction ID : SB21B.31980**

Amount of Each Disbursement this Period

[ ] 5035.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	6

FEC Identification Number

C [ ]

**Transaction ID : SB21B.31981**

Amount of Each Disbursement this Period

[ ] 4.87

Memo Item

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

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

[ ] 5052.99

[ ]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. Facebook, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 06 / 2016

FEC Identification Number C

Transaction ID : SB21B.31982

Amount of Each Disbursement this Period 5013.87

Memo Item

**B. Facebook, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 07 / 2016

FEC Identification Number C

Transaction ID : SB21B.31969

Amount of Each Disbursement this Period 4481.09

Memo Item

**C. Facebook, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 07 / 2016

FEC Identification Number C

Transaction ID : SB21B.31971

Amount of Each Disbursement this Period 5001.96

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14496.92

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31971**  
 Amount of Each Disbursement this Period  
 36.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31972**  
 Amount of Each Disbursement this Period  
 4972.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31973**  
 Amount of Each Disbursement this Period  
 4940.43

Memo Item

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

9949.34

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31974**  
 Amount of Each Disbursement this Period  
 66.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31975**  
 Amount of Each Disbursement this Period  
 39.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31976**  
 Amount of Each Disbursement this Period  
 4964.36

Memo Item

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

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

5070.15

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31963</b>
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Amount of Each Disbursement this Period [ ] 14.83
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31964</b>
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Amount of Each Disbursement this Period [ ] 4985.27
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31965</b>
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Amount of Each Disbursement this Period [ ] 30.46
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5030.56
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31966**  
 Amount of Each Disbursement this Period  
 4972.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31967**  
 Amount of Each Disbursement this Period  
 27.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31968**  
 Amount of Each Disbursement this Period  
 4977.87

Memo Item

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

9977.14

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31959</b>	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period [ ] 100.36 [ ]
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31960</b>	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period [ ] 5010.90 [ ]
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31961</b>	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period [ ] 36.26 [ ]
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

5147.52

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31962**  
 Amount of Each Disbursement this Period  
 4970.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31955**  
 Amount of Each Disbursement this Period  
 270.34

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31956**  
 Amount of Each Disbursement this Period  
 4735.40

Memo Item

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

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

9976.39

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31957**  
 Amount of Each Disbursement this Period  
 58.64

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31958**  
 Amount of Each Disbursement this Period  
 4945.06

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31951**  
 Amount of Each Disbursement this Period  
 193.38

Memo Item

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

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

5197.08



# 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 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

### A. Facebook, Inc.

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31945  
Amount of Each Disbursement this Period  
195.78

Memo Item

Full Name (Last, First, Middle Initial)

### B. Facebook, Inc.

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31946  
Amount of Each Disbursement this Period  
4809.52

Memo Item

Full Name (Last, First, Middle Initial)

### C. Facebook, Inc.

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31947  
Amount of Each Disbursement this Period  
186.06

Memo Item

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

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

5191.36

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)  
**A. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 12 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.31948  
Amount of Each Disbursement this Period: 4814.29

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 12 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.31949  
Amount of Each Disbursement this Period: 261.60

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 12 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.31950  
Amount of Each Disbursement this Period: 4741.82

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9817.71

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31940</b> Amount of Each Disbursement this Period 5002.04
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31941</b> Amount of Each Disbursement this Period 45.47
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31942</b> Amount of Each Disbursement this Period 4955.18
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10002.69
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31943**  
Amount of Each Disbursement this Period  
178.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31944**  
Amount of Each Disbursement this Period  
4825.58

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31938**  
Amount of Each Disbursement this Period  
35.89

Memo Item

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

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

5039.52

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31939</b> Amount of Each Disbursement this Period [ ] 4967.62	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31936</b> Amount of Each Disbursement this Period [ ] 97.67	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31937</b> Amount of Each Disbursement this Period [ ] 4905.08	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 9970.37
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31934**  
 Amount of Each Disbursement this Period  
 4984.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31935**  
 Amount of Each Disbursement this Period  
 16.77

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 19 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31932**  
 Amount of Each Disbursement this Period  
 8.40

Memo Item

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

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

5009.21

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 19 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31933**  
 Amount of Each Disbursement this Period  
 5002.66

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31928**  
 Amount of Each Disbursement this Period  
 4.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31928**  
 Amount of Each Disbursement this Period  
 4997.29

Memo Item

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

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

10004.06

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31930</b> Amount of Each Disbursement this Period [ ] 7.30	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31931</b> Amount of Each Disbursement this Period [ ] 4993.90	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.3192t</b> Amount of Each Disbursement this Period [ ] 9.08	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5010.28
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31927</b> Amount of Each Disbursement this Period 5041.36
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31920</b> Amount of Each Disbursement this Period 72.90
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31921</b> Amount of Each Disbursement this Period 4936.06
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

10050.32

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31922**  
 Amount of Each Disbursement this Period  
 19.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31923**  
 Amount of Each Disbursement this Period  
 4983.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 22 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31924**  
 Amount of Each Disbursement this Period  
 24.71

Memo Item

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

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

5027.86

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.31925</b> Amount of Each Disbursement this Period 4988.04	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type
Purpose of Disbursement Advertising Expenses			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.31916</b> Amount of Each Disbursement this Period 12.53	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type
Purpose of Disbursement Advertising Expenses			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.31917</b> Amount of Each Disbursement this Period 4991.43	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type
Purpose of Disbursement Advertising Expenses			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9992.00
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31918</b> Amount of Each Disbursement this Period [ ] 10.00	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31919</b> Amount of Each Disbursement this Period [ ] 4998.01	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31914</b> Amount of Each Disbursement this Period [ ] 12.81	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5020.82
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31915</b> Amount of Each Disbursement this Period 5011.21	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31910</b> Amount of Each Disbursement this Period 5000.86	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31911</b> Amount of Each Disbursement this Period 5.12	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10017.19
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31912**  
 Amount of Each Disbursement this Period  
 12.28

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31913**  
 Amount of Each Disbursement this Period  
 4998.85

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31906**  
 Amount of Each Disbursement this Period  
 2.92

Memo Item

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

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

5014.05

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31907</b> Amount of Each Disbursement this Period 5014.67
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31908</b> Amount of Each Disbursement this Period 4.58
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31909</b> Amount of Each Disbursement this Period 5002.52
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Advertising Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10021.77
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31902**  
 Amount of Each Disbursement this Period  
 4.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31903**  
 Amount of Each Disbursement this Period  
 4998.31

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31904**  
 Amount of Each Disbursement this Period  
 13.96

Memo Item

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

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

5017.07

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C <b>Transaction ID : SB21B.31905</b> Amount of Each Disbursement this Period 4991.52
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising Expenses	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C <b>Transaction ID : SB21B.31898</b> Amount of Each Disbursement this Period 31.63
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising Expenses	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2016
Mailing Address 1601 Willow Road		FEC Identification Number C <b>Transaction ID : SB21B.31898</b> Amount of Each Disbursement this Period 4972.00
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising Expenses	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9995.15
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31900</b> Amount of Each Disbursement this Period [ ] 5020.63	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.31901</b> Amount of Each Disbursement this Period [ ] 4.21	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Facebook, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 1601 Willow Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.3189c</b> Amount of Each Disbursement this Period [ ] 140.56	
City Menlo Park	State CA	Zip Code 94025-1452	Category/ Type [ ]
Purpose of Disbursement Advertising Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5165.40
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)  
**A. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 29 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : **SB21B.31897**

Amount of Each Disbursement this Period: 4868.38

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : **SB21B.31894**

Amount of Each Disbursement this Period: 322.59

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Facebook, Inc.**

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2016

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : **SB21B.31895**

Amount of Each Disbursement this Period: 4681.14

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9872.11

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31888**  
 Amount of Each Disbursement this Period  
 4963.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31889**  
 Amount of Each Disbursement this Period  
 51.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.3189c**  
 Amount of Each Disbursement this Period  
 165.47

Memo Item

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

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

5179.98

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31891

Amount of Each Disbursement this Period

4857.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31892

Amount of Each Disbursement this Period

27.36

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31893

Amount of Each Disbursement this Period

4884.03

Memo Item

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

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

9768.69

**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

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Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31886**  
 Amount of Each Disbursement this Period  
 14.53

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31887**  
 Amount of Each Disbursement this Period  
 5042.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31888**  
 Amount of Each Disbursement this Period  
 5012.03

Memo Item

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

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

10068.69

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31884**  
 Amount of Each Disbursement this Period  
 130.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31885**  
 Amount of Each Disbursement this Period  
 4874.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31875**  
 Amount of Each Disbursement this Period  
 16.31

Memo Item

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

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

5020.50

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2016

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.31880**  
Amount of Each Disbursement this Period  
[ ] 4984.94

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2016

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.31881**  
Amount of Each Disbursement this Period  
[ ] 32.48

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2016

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.31882**  
Amount of Each Disbursement this Period  
[ ] 4973.71

Memo Item

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

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

[ ] 9991.13

[ ]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31877

Amount of Each Disbursement this Period

5020.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31878

Amount of Each Disbursement this Period

5003.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

FEC Identification Number

C

Transaction ID : SB21B.31874

Amount of Each Disbursement this Period

5024.31

Memo Item

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

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

15049.01

**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

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Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31875**  
 Amount of Each Disbursement this Period  
 0.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31876**  
 Amount of Each Disbursement this Period  
 5000.09

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 09 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31871**  
 Amount of Each Disbursement this Period  
 5004.47

Memo Item

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

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

10004.66

**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

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**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

FEC Identification Number

C [ ]

Transaction ID : SB21B.31872

Amount of Each Disbursement this Period

[ ] 9.78

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

FEC Identification Number

C [ ]

Transaction ID : SB21B.31873

Amount of Each Disbursement this Period

[ ] 5008.61

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City  
Menlo Park

State  
CA

Zip Code  
94025-1452

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C [ ]

Transaction ID : SB21B.31871

Amount of Each Disbursement this Period

[ ] 5005.84

Memo Item

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

[ ] 10024.23

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31869  
Amount of Each Disbursement this Period  
5002.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31868  
Amount of Each Disbursement this Period  
5000.33

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31867  
Amount of Each Disbursement this Period  
5000.09

Memo Item

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

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

15003.38



**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31864**  
Amount of Each Disbursement this Period  
3000.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31861**  
Amount of Each Disbursement this Period  
266.78

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook, Inc.**

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94025-1452

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31862**  
Amount of Each Disbursement this Period  
2504.67

Memo Item

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

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

5771.85

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31991**  
 Amount of Each Disbursement this Period  
 50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31992**  
 Amount of Each Disbursement this Period  
 200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31993**  
 Amount of Each Disbursement this Period  
 350.00

Memo Item

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

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

600.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31994  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31995  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.31996  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

1500.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31997**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31998**  
 Amount of Each Disbursement this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.31999**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

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

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

3000.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32000**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32001**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32002**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

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

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

1500.00

**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

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**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32003**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32004**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32005**  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

1500.00



# 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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. Google, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 09 / 2016

FEC Identification Number C

**Transaction ID : SB21B.32009**

Amount of Each Disbursement this Period 500.00

Memo Item

**B. Google, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 09 / 2016

FEC Identification Number C

**Transaction ID : SB21B.32010**

Amount of Each Disbursement this Period 500.00

Memo Item

**C. Google, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 10 / 2016

FEC Identification Number C

**Transaction ID : SB21B.32011**

Amount of Each Disbursement this Period 500.00

Memo Item

**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"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32012**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32013**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32014**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

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

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

1500.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32015  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32016  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32017  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

1500.00

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32018**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32019**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google, Inc.**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043-0000

Purpose of Disbursement Advertising Expenses

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32020**  
Amount of Each Disbursement this Period  
28.49

Memo Item

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

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

1028.49

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32049**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32050**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32051**  
Amount of Each Disbursement this Period

Memo Item

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

### A. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32052

Amount of Each Disbursement this Period

260.09

Memo Item

Full Name (Last, First, Middle Initial)

### B. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 05 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32053

Amount of Each Disbursement this Period

204.38

Memo Item

Full Name (Last, First, Middle Initial)

### C. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32054

Amount of Each Disbursement this Period

374.49

Memo Item

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

838.96

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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32055  
Amount of Each Disbursement this Period  
1479.41

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32056  
Amount of Each Disbursement this Period  
1199.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32057  
Amount of Each Disbursement this Period  
740.67

Memo Item

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

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

3419.48

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.32058

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.32059

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.3206t

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 13 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32061  
Amount of Each Disbursement this Period  
546.46

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32062  
Amount of Each Disbursement this Period  
445.67

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32063  
Amount of Each Disbursement this Period  
450.60

Memo Item

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

1442.73

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32064**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32065**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32066**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 19 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32067

Amount of Each Disbursement this Period

[ ] 525.79

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32068

Amount of Each Disbursement this Period

[ ] 936.27

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 21 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32069

Amount of Each Disbursement this Period

[ ] 894.15

Memo Item

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

[ ] 2356.21

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32070  
Amount of Each Disbursement this Period  
1668.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32071  
Amount of Each Disbursement this Period  
685.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32072  
Amount of Each Disbursement this Period  
530.58

Memo Item

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

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

2884.56

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32073

Amount of Each Disbursement this Period

[REDACTED] 834.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32074

Amount of Each Disbursement this Period

[REDACTED] 1102.23

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32075

Amount of Each Disbursement this Period

[REDACTED] 868.18

Memo Item

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

[REDACTED] 2804.60

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

[REDACTED]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. Stripe, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 28 / 2016

FEC Identification Number  
C  
Transaction ID : SB21B.32076  
Amount of Each Disbursement this Period  
741.10

Memo Item

**B. Stripe, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 29 / 2016

FEC Identification Number  
C  
Transaction ID : SB21B.32077  
Amount of Each Disbursement this Period  
721.20

Memo Item

**C. Stripe, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2016

FEC Identification Number  
C  
Transaction ID : SB21B.32078  
Amount of Each Disbursement this Period  
596.68

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2058.98

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32079

Amount of Each Disbursement this Period

[REDACTED] 556.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32080

Amount of Each Disbursement this Period

[REDACTED] 485.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.32081

Amount of Each Disbursement this Period

[REDACTED] 399.68

Memo Item

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

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

[REDACTED] 1442.05

[REDACTED]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 03 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.32082**  
Amount of Each Disbursement this Period  
 690.28

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 04 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.32083**  
Amount of Each Disbursement this Period  
 650.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 05 / 2016

FEC Identification Number

C   
**Transaction ID : SB21B.32084**  
Amount of Each Disbursement this Period  
 293.42

Memo Item

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

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

1634.40

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32085

Amount of Each Disbursement this Period

[ ] 161.81

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32086

Amount of Each Disbursement this Period

[ ] 146.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32087

Amount of Each Disbursement this Period

[ ] 157.63

Memo Item

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

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

[ ] 465.65

[ ]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 09 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32088

Amount of Each Disbursement this Period

298.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32089

Amount of Each Disbursement this Period

439.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

FEC Identification Number

C

Transaction ID : SB21B.3209c

Amount of Each Disbursement this Period

147.40

Memo Item

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

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

885.38

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32091**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32092**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32093**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32094

Amount of Each Disbursement this Period

69.36

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32095

Amount of Each Disbursement this Period

79.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32096

Amount of Each Disbursement this Period

54.41

Memo Item

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

202.92

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32097

Amount of Each Disbursement this Period

[ ] 147.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32098

Amount of Each Disbursement this Period

[ ] 54.16

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32099

Amount of Each Disbursement this Period

[ ] 112.63

Memo Item

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

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

[ ] 314.27

[ ]

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32100  
Amount of Each Disbursement this Period

50.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32101  
Amount of Each Disbursement this Period

88.77

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32102  
Amount of Each Disbursement this Period

317.61

Memo Item

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

457.06

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32103**  
Amount of Each Disbursement this Period  
397.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32104**  
Amount of Each Disbursement this Period  
281.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.32105**  
Amount of Each Disbursement this Period  
107.36

Memo Item

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

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

786.76

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32106  
Amount of Each Disbursement this Period  
71.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32107  
Amount of Each Disbursement this Period  
100.66

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32108  
Amount of Each Disbursement this Period  
128.25

Memo Item

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

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

299.98

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32109  
Amount of Each Disbursement this Period  
8.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32110  
Amount of Each Disbursement this Period  
67.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32111  
Amount of Each Disbursement this Period  
16.85

Memo Item

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

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

92.91

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32112  
Amount of Each Disbursement this Period  
15.06

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32113  
Amount of Each Disbursement this Period  
24.81

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32114  
Amount of Each Disbursement this Period  
31.38

Memo Item

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

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

71.25

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32115  
Amount of Each Disbursement this Period  
13.24

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32116  
Amount of Each Disbursement this Period  
40.63

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32117  
Amount of Each Disbursement this Period  
0.02

Memo Item

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

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

53.89

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32118  
Amount of Each Disbursement this Period  
189.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32119  
Amount of Each Disbursement this Period  
62.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.3212t  
Amount of Each Disbursement this Period  
32.53

Memo Item

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

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

285.10

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32121

Amount of Each Disbursement this Period

[ ] 10.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32122

Amount of Each Disbursement this Period

[ ] 21.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2016

FEC Identification Number

C [ ]

Transaction ID : SB21B.32123

Amount of Each Disbursement this Period

[ ] 24.65

Memo Item

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

[ ] 56.80

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32124**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32125**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32126**  
Amount of Each Disbursement this Period

Memo Item

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

### A. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32127

Amount of Each Disbursement this Period

70.26

Memo Item

Full Name (Last, First, Middle Initial)

### B. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32128

Amount of Each Disbursement this Period

71.31

Memo Item

Full Name (Last, First, Middle Initial)

### C. Stripe, Inc.

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32125

Amount of Each Disbursement this Period

10.80

Memo Item

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

152.37

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32130

Amount of Each Disbursement this Period

52.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32131

Amount of Each Disbursement this Period

79.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2016

FEC Identification Number

C

Transaction ID : SB21B.32132

Amount of Each Disbursement this Period

43.21

Memo Item

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

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

175.39

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32133  
Amount of Each Disbursement this Period  
183.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32134  
Amount of Each Disbursement this Period  
79.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32135  
Amount of Each Disbursement this Period  
34.17

Memo Item

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

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

297.78

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32136  
Amount of Each Disbursement this Period  
37.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32137  
Amount of Each Disbursement this Period  
5.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.32138  
Amount of Each Disbursement this Period  
78.20

Memo Item

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

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

120.21

**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

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NAME OF COMMITTEE (In Full)  
**American Horizons PAC**

**A. Stripe, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 29 / 2016

FEC Identification Number  
C

**Transaction ID : SB21B.32139**

Amount of Each Disbursement this Period  
157.63

Memo Item

**B. Stripe, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th Street  
Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 30 / 2016

FEC Identification Number  
C

**Transaction ID : SB21B.32140**

Amount of Each Disbursement this Period  
63.86

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 221.49

**TOTAL** This Period (last page this line number only)..... ▶ 792844.64

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**American Horizons PAC**

**A. BOER, ADRIAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 472 S 200 W

City JEROME State ID Zip Code 83338-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 31 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32034

Amount of Each Disbursement this Period 400.00

Memo Item

**B. BUTLER, DWIGHT, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3030 SEA MARSH RD

City FERNANDINA BEACH State FL Zip Code 32034-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 31 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32036

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. Easlick, David, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15 Heatherfield Ct

City Kilmarnock State VA Zip Code 22482-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 29 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32024

Amount of Each Disbursement this Period 1015.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2415.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**American Horizons PAC**

**A. MCDOWELL, COLEEN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8235 N 62 ND PL

City PARADISE VALLEY State AZ Zip Code 85253-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 07 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32026

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. Mcqueen, John, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2201 Dr. ML King Street North

City Saint Petersburg State FL Zip Code 33704-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 29 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32023

Amount of Each Disbursement this Period 1015.00

Memo Item

**C. MONTALBANO, CHRIS, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4 JOHN ST

City MASSAPEQUA State NY Zip Code 11758-0000

Purpose of Disbursement Contribution Refund

Candidate Name American Horizons PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 08 / 2016

FEC Identification Number C00619577

Transaction ID : SB28A.32027

Amount of Each Disbursement this Period 515.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2530.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**American Horizons PAC**

Full Name (Last, First, Middle Initial) <b>A. O'BRIEN, SEAN J., , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2016
Mailing Address 11941 WESTMINSTER AVE		FEC Identification Number C 00619577 <b>Transaction ID : SB28A.32029</b>
City LOS ANGELES	State CA	Zip Code 90066-0000
Purpose of Disbursement Contribution Refund		Category/ Type 010
Candidate Name <b>American Horizons PAC</b>		Amount of Each Disbursement this Period 250.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. T., JAMES, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016
Mailing Address 10329 HICKORY FOREST DRIVE		FEC Identification Number C 00619577 <b>Transaction ID : SB28A.32032</b>
City OAKTON	State VA	Zip Code 22124-0000
Purpose of Disbursement		Category/ Type 010
Candidate Name <b>American Horizons PAC</b>		Amount of Each Disbursement this Period 500.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

750.00

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

7475.00