

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

RIGHT WAY SUPERPAC

ADDRESS (number and street) PO BOX 27

Check if different than previously reported. (ACC) ALEXANDRIA VA 22313

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

C00620138 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

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

- (c) 12-Day **PRE-Election** Report for the:
- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)
- Election on 08 / 30 / 2016 in the State of AZ

- (d) 30-Day **POST-Election** Report for the:
- General (30G) Runoff (30R) Special (30S)
- Election on / / in the State of

5. Covering Period 07 / 01 / 2016 through 08 / 10 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DANIEL FLYNN

Signature of Treasurer DANIEL FLYNN *[Electronically Filed]* Date 08 / 18 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

RIGHT WAY SUPERPAC

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="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="378500.00"/>	<input type="text" value="378500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="378500.00"/>	<input type="text" value="378500.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="195661.37"/>	<input type="text" value="195661.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="182838.63"/>	<input type="text" value="182838.63"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

RIGHT WAY SUPERPAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2016 To: M M / D D / Y Y Y Y 08 / 10 / 2016

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).....	378500.00	378500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	378500.00	378500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	378500.00	378500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	378500.00	378500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	378500.00	378500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	20.00	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	195641.37	195641.37
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	195661.37	195661.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	195661.37	195661.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	378500.00	378500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	378500.00	378500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20.00	20.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20.00	20.00

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

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

FOR LINE NUMBER: PAGE 6 OF 17
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
RIGHT WAY SUPERPAC

Full Name (Last, First, Middle Initial)
A. BARKLEY AG ENTERPRISES LLP

Mailing Address PO BOX5402

City State Zip Code
YUMA AZ 85366

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BOSKOVICH FARMS INC

Mailing Address PO BOX 1352

City State Zip Code
OXNARD CA 93032

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CALIFORNIA GIANT INC

Mailing Address PO BOX 1359

City State Zip Code
WATSONVILLE CA 95077

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 32000.00

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

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

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

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)
RIGHT WAY SUPERPAC

A. COVE RANCH MANAGEMENT

Full Name (Last, First, Middle Initial)
Mailing Address 1315 EAST CURTIS AVENUE

City REEDLEY	State CA	Zip Code 93654
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
 3500.00

Memo Item
CONTRIBUTION

B. D M CAMP & SONS

Full Name (Last, First, Middle Initial)
Mailing Address 31798 MERCED AVENUE

City BAKERSFIELD	State CA	Zip Code 93308
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period
 3500.00

Memo Item
CONTRIBUTION

C. DUDA FARM FRESH FOODS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 620257

City OVIEDO	State FL	Zip Code 32762
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
 3500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<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)
RIGHT WAY SUPERPAC

Full Name (Last, First, Middle Initial)
A. DAVID GILL

Mailing Address 1315 EAST CURTIS AVENUE

City REEDLEY	State CA	Zip Code 93654
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FEC ID number of contributing federal political committee. **C**

Name of Employer GILLS ONIONS	Occupation FARMING
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. GROFF FAMILY TRUST

Mailing Address 9832 CALVIN AVENUE

City NORTHRIDGE	State CA	Zip Code 91324
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. J-V FARMS INC

Mailing Address 701 W 16TH STREET #201

City YUMA	State AZ	Zip Code 85364
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	153500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<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)
RIGHT WAY SUPERPAC

A. MISSION PRODUCE INC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 E VINEYARD AVENUE
 SUITE 300
 City OXNARD State CA Zip Code 93036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016
Transaction ID : SA11AI.4169
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. MARK NICKERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 86-705 AVENUE 54
 SUITE A
 City COACHELLA State CA Zip Code 92236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PRIME TIME PRODUCE EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11AI.4165
 Amount of Each Receipt this Period
 3500.00
 Memo Item
CONTRIBUTION

C. PASQUINELLI PRODUCE CO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2144 W 24ST ST
 City YUMA State AZ Zip Code 85364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11AI.4160
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	18500.00
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 10 OF 17
	<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)
RIGHT WAY SUPERPAC

A. ROUSSEAU FARMING CO
 Full Name (Last, First, Middle Initial)
 Mailing Address 9601 W HARRISON ST
 City TOLLESON State AZ Zip Code 85353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11AI.4167
 Amount of Each Receipt this Period
 3500.00
 Memo Item
CONTRIBUTION

B. TALLEY FARMS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 360
 City ARROYO GRANDE State CA Zip Code 93420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11AI.4166
 Amount of Each Receipt this Period
 3500.00
 Memo Item
CONTRIBUTION

C. TANIMURA AND ANTLE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 4070
 City SALINAS State CA Zip Code 93912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11AI.4161
 Amount of Each Receipt this Period
 3500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	10500.00
TOTAL This Period (last page this line number only).....	▶	

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

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

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

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NAME OF COMMITTEE (In Full)
RIGHT WAY SUPERPAC

Full Name (Last, First, Middle Initial)
A. WESTERN GROWERS

Mailing Address 1415 L ST
#1060

City State Zip Code
SACRAMENTO CA 95814

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. WOOLF ENTERPRISES

Mailing Address 7041 N VAN NESS BLVD

City State Zip Code
FRESNO CA 93711

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	153500.00
TOTAL This Period (last page this line number only).....▶	378500.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIGHT WAY SUPERPAC	FEC IDENTIFICATION NUMBER ▼ C C00620138
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee AWARENESS ANALYTICS PARTNERS LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 08 / 2016
Mailing Address 333 W NORTH AVE # 122	Amount 2195.37
City State Zip Code CHICAGO IL 60610	
Purpose of Expenditure MEDIA PRODUCTION / PLACEMENT	Category/Type 004
Name of Federal Candidate PAUL ANTHONY GOSAR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought 195641.37	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee DEL CIELO MEDIA LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Mailing Address 1427 LESLIE AVE SUITE 102	Amount 59039.20
City State Zip Code ALEXANDRIA VA 22301	
Purpose of Expenditure MEDIA PRODUCTION / PLACEMENT	Category/Type 004
Name of Federal Candidate PAUL ANTHONY GOSAR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought 59039.20	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	61234.57
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DANIEL FLYNN [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIGHT WAY SUPERPAC	FEC IDENTIFICATION NUMBER ▼ C C00620138
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee DEL CIELO MEDIA LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Mailing Address 1427 LESLIE AVE SUITE 102	Amount 9458.40
City State Zip Code ALEXANDRIA VA 22301	
Purpose of Expenditure MEDIA PRODUCTION / PLACEMENT	Category/Type 004
Name of Federal Candidate RAYMOND JOHN STRAUSS	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Name of Federal Candidate RAYMOND JOHN STRAUSS	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
68497.60	

Full Name of Payee DEL CIELO MEDIA LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Mailing Address 1427 LESLIE AVE SUITE 102	Amount 9458.40
City State Zip Code ALEXANDRIA VA 22301	
Purpose of Expenditure MEDIA PRODUCTION / PLACEMENT	Category/Type 004
Name of Federal Candidate PAUL ANTHONY GOSAR	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Name of Federal Candidate PAUL ANTHONY GOSAR	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
77956.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	18916.80
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DANIEL FLYNN

Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
RIGHT WAY SUPERPAC
FEC IDENTIFICATION NUMBER
C C00620138
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DEL CIELO MEDIA LLC
Mailing Address: 1427 LESLIE AVE SUITE 102
City: ALEXANDRIA VA Zip Code: 22301
Purpose of Expenditure: MEDIA PLACEMENT Category/Type: 004
Name of Federal Candidate: PAUL ANTHONY GOSAR
Office Sought: House District: 04 State: AZ
Amount: 49439.20
Transaction ID: SE.4125
Date of Disbursement or Obligation: 08/02/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 127395.20

Full Name of Payee: DEL CIELO MEDIA LLC
Mailing Address: 1427 LESLIE AVE SUITE 102
City: ALEXANDRIA VA Zip Code: 22301
Purpose of Expenditure: MEDIA PLACEMENT Category/Type: 004
Name of Federal Candidate: PAUL ANTHONY GOSAR
Office Sought: House District: 04 State: AZ
Amount: 9750.40
Transaction ID: SE.4126
Date of Disbursement or Obligation: 08/02/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 137145.60

(a) SUBTOTAL of Itemized Independent Expenditures: 59189.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: DANIEL FLYNN [Electronically Filed] Date: 08/18/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIGHT WAY SUPERPAC	FEC IDENTIFICATION NUMBER ▼ C C00620138
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee DEL CIELO MEDIA LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 09 / 2016
Mailing Address 1427 LESLIE AVE SUITE 102	Amount 9750.40
City State Zip Code ALEXANDRIA VA 22301	Transaction ID : SE.4128 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Purpose of Expenditure MEDIA PLACEMENT	Category/Type 004
Name of Federal Candidate RAYMOND JOHN STRAUSS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President State: AZ
Calendar Year-To-Date Per Election for Office Sought 146896.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee IMPACT ADVERTISING LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 02 / 2016
Mailing Address 1870 E 3355 S	Amount 15104.00
City State Zip Code SALT LAKE CITY UT 84106	Transaction ID : SE.4101 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 04 / 2016
Purpose of Expenditure PRINTING / POSTAGE	Category/Type 004
Name of Federal Candidate PAUL ANTHONY GOSAR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President State: AZ
Calendar Year-To-Date Per Election for Office Sought 162000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	24854.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DANIEL FLYNN
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y 08 / 18 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
RIGHT WAY SUPERPAC
FEC IDENTIFICATION NUMBER
C C00620138
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
IMPACT ADVERTISING LLC
Mailing Address 1870 E 3355 S
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure PRINTING / POSTAGE Category/Type 004
Name of Federal Candidate PAUL ANTHONY GOSAR Support Oppose
Office Sought: House District: 04 State: AZ
Calendar Year-To-Date Per Election for Office Sought 170171.00
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
IMPACT ADVERTISING LLC
Mailing Address 1870 E 3355 S
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure PRINTING / POSTAGE Category/Type 001
Name of Federal Candidate PAUL ANTHONY GOSAR Support Oppose
Office Sought: House District: 04 State: AZ
Calendar Year-To-Date Per Election for Office Sought 178342.00
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16342.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
DANIEL FLYNN [Electronically Filed] Date 08 / 18 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RIGHT WAY SUPERPAC	FEC IDENTIFICATION NUMBER ▼ C C00620138
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee IMPACT ADVERTISING LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 08 / 2016
Mailing Address 1870 E 3355 S	Amount 15104.00
City State Zip Code SALT LAKE CITY UT 84106	Transaction ID : SE.4117 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 09 / 2016
Purpose of Expenditure PRINTING / POSTAGE Category/Type 004	Name of Federal Candidate PAUL ANTHONY GOSAR <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 193446.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15104.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	195641.37

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DANIEL FLYNN [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Signature