



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Louisiana Values 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="2015"/>	<input type="text" value="23639.05"/>	<input type="text" value="23639.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18077.77"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10000.00"/>	<input type="text" value="47636.78"/>
(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="28077.77"/>	<input type="text" value="71275.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12279.13"/>	<input type="text" value="55477.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15798.64"/>	<input type="text" value="15798.64"/>
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  
**Louisiana Values PAC**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9000.00	45000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9000.00	45000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10000.00	46000.00
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	1636.78
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))..... ▶	10000.00	47636.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10000.00	47636.78

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	2679.13	23877.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2679.13	23877.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9600.00	31000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	600.00
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)) ..	12279.13	55477.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12279.13	55477.19

**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) .....	10000.00	46000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10000.00	46000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2679.13	23877.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2679.13	23877.19

**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 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

**A. Kelly Barnett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 Pollard Place  
 City Shreveport State LA Zip Code 71106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wiener, Weiss & Madison Law Occupation landman/title abstractor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.5406**  
 Amount of Each Receipt this Period  
 2250.00

**B. Amy Bicknell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 320 Johns Bluff Circle  
 City Shreveport State LA Zip Code 71106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015  
**Transaction ID : SA11AI.5409**  
 Amount of Each Receipt this Period  
 500.00

**C. W. Stewart Bundrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 207 North Beach Drive  
 City Bossier City State LA Zip Code 71111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ark-La-Tex Urology Occupation Urologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015  
**Transaction ID : SA11AI.5396**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00  
**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 7 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)  
**A. Alison Crowther**

Mailing Address 333 Texas Street, Suite 2300

City State Zip Code  
Shreveport LA 71101

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 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  
 12 / 09 / 2015  
**Transaction ID : SA11AI.5414**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Dr. Josephine Futrell**

Mailing Address 10875 Belle Cour Way

City State Zip Code  
Shreveport LA 71106

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

Name of Employer Occupation  
Ark-La-Tex Dermatology Dermatologist

Receipt For:  
 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 / 25 / 2015  
**Transaction ID : SA11AI.5390**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Grady C. Golden Sr.**

Mailing Address P.O. Box 295

City State Zip Code  
Shreveport LA 71162

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

Name of Employer Occupation  
Builders Supply Company, Inc. Owner

Receipt For:  
 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  
 11 / 19 / 2015  
**Transaction ID : SA11AI.5412**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael Gray**

Mailing Address **PO Box 6202**

City **Metairie**      State **LA**      Zip Code **70009**

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

Name of Employer: **Gray Insurance**      Occupation: **Insurance**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**11 / 06 / 2015**  
**Transaction ID : SA11AI.5398**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Stephen Kreller**

Mailing Address **757 St. Charles Avenue**

City **New Orleans**      State **LA**      Zip Code **70130**

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

Name of Employer: **The Kreller Law Firm**      Occupation: **Attorney**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**10 / 21 / 2015**  
**Transaction ID : SA11AI.5400**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. Mary Ingram Long**

Mailing Address **704 St. Clair Avenue**

City **Natchitoches**      State **LA**      Zip Code **71457**

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

Name of Employer: **Self Employed**      Occupation: **Physician**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**08 / 25 / 2015**  
**Transaction ID : SA11AI.5391**

Amount of Each Receipt this Period  
**1500.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2250.00**

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

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

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

FOR LINE NUMBER: PAGE 9 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)  
**A. Querbes & Nelson**

Mailing Address PO Box 5

City Shreveport      State LA      Zip Code 71161

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.5402**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. George Nelson**

Mailing Address P.O. Box 5

City Shreveport      State LA      Zip Code 71161

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

Name of Employer Louisiana Companies      Occupation President

Receipt For:  
 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  
 10 / 21 / 2015  
**Transaction ID : SA11AI.5402.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. Alma Rozeman**

Mailing Address 510 Longleaf

City Shreveport      State LA      Zip Code 71106

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

Name of Employer None      Occupation Homemaker

Receipt For:  
 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 / 25 / 2015  
**Transaction ID : SA11AI.5389**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 13  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)  
**A. COMPUTER SCIENCES CORPORATION PAC**  
 Mailing Address 3170 FAIRVIEW PARK DR.  
 City State Zip Code  
 FALLS CHURCH VA 22042  
 FEC ID number of contributing federal political committee. **C** C00101410  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11C.5410**  
 Amount of Each Receipt this Period  
 1000.00

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. Beads By the Dozen**

Mailing Address 333 Edwards Avenue

City New Orleans State LA Zip Code 71023

Purpose of Disbursement  
Mardi Gras Beads for Donor Fulfillment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

**Transaction ID : SB21B.5407**

Amount of Each Disbursement this Period

690.09

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Campaign Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2015

**Transaction ID : SB21B.5393**

Amount of Each Disbursement this Period

749.05

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

**Transaction ID : SB21B.5408**

Amount of Each Disbursement this Period

91.25

Category/  
Type

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

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

1530.39

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 18 / 2015

Transaction ID : **SB21B.5413**

Amount of Each Disbursement this Period: 217.50

Category/Type

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 17 / 2015

Transaction ID : **SB21B.5415**

Amount of Each Disbursement this Period: 166.24

Category/Type

Full Name (Last, First, Middle Initial)

**C. Mystick Krewe of Louisianaians, Inc.**

Mailing Address Post Office Box 80518

City Baton Rouge State LA Zip Code 70890

Purpose of Disbursement Event Tickets

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2015

Transaction ID : **SB21B.5394**

Amount of Each Disbursement this Period: 765.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1148.74

**TOTAL** This Period (last page this line number only)..... ▶ 2679.13

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

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NAME OF COMMITTEE (In Full)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. LAMBORN FOR CONGRESS**

Mailing Address P.O. BOX 64107

City COLORADO SPRINGS State CO Zip Code 80962

Purpose of Disbursement

Candidate Name  
**DOUGLAS L LAMBORN**

Office Sought:  House  Senate  President  
State: CO District: 05

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 / 01 / 2015

Transaction ID : **SB23.5379**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. RON DESANTIS FOR FLORIDA**

Mailing Address PO BOX 405

City POINTE VEDRA State FL Zip Code 32004

Purpose of Disbursement

Candidate Name  
**RONALD D DESANTIS**

Office Sought:  House  Senate  President  
State: FL District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2015

Transaction ID : **SB23.5397**

Amount of Each Disbursement this Period

4600.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

9600.00

9600.00