

# 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**  
**LEE PAC**

ADDRESS (number and street) **47 FLINTLOCK DRIVE**  
 Check if different than previously reported. (ACC) **SHIRLEY NY 11967**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00573626** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(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  /  /  09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Marks, Nancy, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Marks, Nancy, , ,* [Electronically Filed] Date  /  /  10 15 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**LEE 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="25061.72"/>	<input type="text" value="25061.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9081.10"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="79334.84"/>	<input type="text" value="92234.84"/>
(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="88415.94"/>	<input type="text" value="117296.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29769.78"/>	<input type="text" value="58650.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="58646.16"/>	<input type="text" value="58646.16"/>
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

**LEE PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 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).....	22300.00	35200.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	22300.00	35200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4500.00	4500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	26800.00	39700.00
12. Transfers From Affiliated/Other Party Committees.....	52534.84	52534.84
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)).....▶	79334.84	92234.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	79334.84	92234.84

**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 .....	6869.78	30750.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6869.78	30750.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22900.00	27900.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29769.78	58650.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29769.78	58650.40

**DETAILED SUMMARY PAGE**  
of Disbursements

<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) .....	26800.00	39700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26800.00	39700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6869.78	30750.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6869.78	30750.40

**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 29
	(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

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)  
**LEE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Chu, David, , ,</b>		Date of Receipt
Mailing Address 175 Gnarled Hollow Rd		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City Setauket	State NY	Zip Code 11733
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4235</b>
Name of Employer (for Individual) NSHOA		Occupation (for Individual) Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="600.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hillman, Tatnall, , ,</b>		Date of Receipt
Mailing Address 504 W. Bleeker Street		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2016"/>
City Aspen	State CO	Zip Code 81611
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4370</b>
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2700.00"/>	Amount of Each Receipt this Period <input type="text" value="2700.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Krupinski, Ben, , ,</b>		Date of Receipt
Mailing Address 99 Newton Lane		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City E. Hampton	State NY	Zip Code 11937
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4259</b>
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Builder
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3800.00"/>
<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 7 OF 29
	<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)  
**LEE PAC**

**A. Krupinski, Ben, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 99 Newton Lane  
 City E. Hampton State NY Zip Code 11937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Builder  
 Receipt For:  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 / 29 / 2016  
**Transaction ID : SA11AI.4248**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Krupinski, Ben, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 99 Newton Lane  
 City E. Hampton State NY Zip Code 11937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Builder  
 Receipt For:  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 / 30 / 2016  
**Transaction ID : SA11AI.4258**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Nawaz, Shahid, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Ellbridge Ct  
 City S. Setauket State NY Zip Code 11720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NSHOA Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2016  
**Transaction ID : SA11AI.4229**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<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 8 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 14225 Ventura Blvd Ste 100

City Sherman Oaks	State CA	Zip Code 91423
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Home Maker	Occupation (for Individual) Home Maker
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2016

**Transaction ID : SA11AI.4240**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 55 East 59th St Apt 22B

City New York	State NY	Zip Code 10022
------------------	-------------	-------------------

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

Name of Employer (for Individual) News Communications Inc	Occupation (for Individual) Executive
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2016

**Transaction ID : SA11AI.4242**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 70 Wilmington Dr

City Melville	State NY	Zip Code 11747
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NSHOA	Occupation (for Individual) Physician
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2016

**Transaction ID : SA11AI.4231**

Amount of Each Receipt this Period  
600.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10600.00
<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 29
	<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)  
**LEE PAC**

**A. Syali, Gurmohan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 Breeley Blvd  
 City Melville State NY Zip Code 11747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NSHOA Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11AI.4233**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**B. Tuchman, Morris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 Lexington Avenue  
 City New York State NY Zip Code 10016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morris Tuchman Esq Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 12 / 2016  
**Transaction ID : SA11AI.4368**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. Vacirca, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Valentine Rd  
 City Shoreham State NY Zip Code 11786  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NSHOA Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11AI.4237**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	22300.00

**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 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 961039  
 City FORT WORTH State TX Zip Code 76161  
 FEC ID number of contributing federal political committee. **C** C00235739  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 19 / 2016**  
**Transaction ID : SA11C.4351**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. International Union of Operating Engineers**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 206  
 City Farmingdale State NY Zip Code 11735  
 FEC ID number of contributing federal political committee. **C** C00247197  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 17 / 2016**  
**Transaction ID : SA11C.4246**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 MASSACHUSETTS AVE., NW  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00238725  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **09 / 29 / 2016**  
**Transaction ID : SA11C.4353**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4500.00

**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 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

**A. ROYCE ZELDIN VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00624262

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2285.02

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2016  
**Transaction ID : SA12.4335**

Amount of Each Receipt this Period  
2285.02

Memo Item  
transfer of funds

**B. Rosenwald, Nina, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 800 Fifth Avenue Apt 24D

City New York	State NY	Zip Code 10065
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Ratstore Institute President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2285.02

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 25 / 2016  
**Transaction ID : SA12.4335.0**

Amount of Each Receipt this Period  
2285.02

Memo Item

**C. ZELDIN 2016**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00573683

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4724.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2016  
**Transaction ID : SA12.4341**

Amount of Each Receipt this Period  
4724.50

Memo Item  
transfr of funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7009.52
<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 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goldberg, Craig, , ,</b>		Date of Receipt
Mailing Address 1048 Park Avenue		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4341.0</b>
Name of Employer (for Individual) Synterra Capital Mgmt		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Private Equity		<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mosler, Bruce, , ,</b>		Date of Receipt
Mailing Address 1290 Avenue of the Americas		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2016"/>
City New York	State NY	Zip Code 10104
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4341.1</b>
Name of Employer (for Individual) Cushman & Wakefield		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Real Estate Executive		<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nespola, Richard, , ,</b>		Date of Receipt
Mailing Address PO Box 1230		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2016"/>
City Bridgehampton	State NY	Zip Code 11932
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4341.2</b>
Name of Employer (for Individual) Quimby Ventures LLC		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual) Partner		<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<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 13 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

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

Mailing Address 709 Daniels Lane

City Sagaponack	State NY	Zip Code 11962
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

**Transaction ID : SA12.4341.3**

Amount of Each Receipt this Period  
4800.00

Memo Item

**B. ZELDIN VICTORY COMMITTEE 2016**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00579920

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2016

**Transaction ID : SA12.4308**

Amount of Each Receipt this Period  
30000.00

Memo Item

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

Mailing Address 11 Lawrence Lane

City E Meadow	State NY	Zip Code 11554
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Brach's Supermarkets	Occupation (for Individual) President
---	--

Receipt For:  
 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
08	/	22	/	2016

**Transaction ID : SA12.4308.0**

Amount of Each Receipt this Period  
2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<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 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Browne, Anthony, , ,</b>		Date of Receipt
Mailing Address 495 Brickell Avenue Apt 4305		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City Miami	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4308.1</b>
Name of Employer (for Individual) The Browne Group		Occupation (for Individual) Managing Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2300.00"/>	Amount of Each Receipt this Period <input type="text" value="2300.00"/>
		<input checked="" type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Jackey, William, , ,</b>		Date of Receipt
Mailing Address PO Box 657		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2016"/>
City E Moriches	State NY	Zip Code 11940
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4308.2</b>
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input checked="" type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Knott, David, , ,</b>		Date of Receipt
Mailing Address 485 Underhill Blvd		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
City Syosset	State NY	Zip Code 11791
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4308.3</b>
Name of Employer (for Individual) Underhill Partners		Occupation (for Individual) Managing Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<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 15 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

**A. Knott, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 485 Underhill Blvd  
 City Syosset State NY Zip Code 11791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 24 / 2016  
**Transaction ID : SA12.4308.4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Kosinski, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 Broadway Ste 1936  
 City New York State NY Zip Code 10004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brio Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA12.4308.5**  
 Amount of Each Receipt this Period 2300.00  
 Memo Item

**C. Louro, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Hunters Way  
 City Nissequogue State NY Zip Code 11780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PGP Benefits Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016  
**Transaction ID : SA12.4308.6**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 16 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

**A. Louro, Amanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 West 25th Street  
 City New York State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Group M Occupation (for Individual) Jr Account Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016  
**Transaction ID : SA12.4308.7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Louro Jr., Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Hunters Way  
 City Nissequogue State NY Zip Code 11780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PGP Inc Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016  
**Transaction ID : SA12.4308.8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Louro, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Hunters Way  
 City Nissequogue State NY Zip Code 11780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PGP Inc Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016  
**Transaction ID : SA12.4308.9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 17 OF 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MacDonald, Sharon, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 22 / 2016
Mailing Address 5 Fox Point Drive		<b>Transaction ID : SA12.4308.10</b>
City Nissequogue	State NY	Zip Code 11780
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pius, Donald, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 10 / 2016
Mailing Address 794 Ft Salonga Road		<b>Transaction ID : SA12.4308.11</b>
City Northport	State NY	Zip Code 11768
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer (for Individual) Pius Realty	Occupation (for Individual) Owner	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schwerin, Warren, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2016
Mailing Address 667 Ocean Road		<b>Transaction ID : SA12.4308.12</b>
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4800.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 29
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

**A. ZELDIN VICTORY COMMITTEE 2016**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00579920

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45325.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

**Transaction ID : SA12.4333**

Amount of Each Receipt this Period  
15325.32

Memo Item

**B. ZELDIN VICTORY COMMITTEE 2016**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00579920

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45525.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

**Transaction ID : SA12.4339**

Amount of Each Receipt this Period  
200.00

Memo Item  
transfer of funds

**C. Schwerin, Warren, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 667 Ocean Road

City Vero Beach	State FL	Zip Code 32963
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

**Transaction ID : SA12.4339.0**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15525.32
<b>TOTAL</b> This Period (last page this line number only).....	52534.84

**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)  
**LEE PAC**

Full Name (Last, First, Middle Initial) <b>A. DoubleTree Cleveland</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2016	
Mailing Address 1111 Lakeside Ave				
City Cleveland	State OH	Zip Code 44114	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4306</b>	
Purpose of Disbursement Deposit for Hotel			Amount of Each Disbursement this Period 200.00	
Candidate Name <b>LEE PAC</b>			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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DoubleTree Cleveland</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2016	
Mailing Address 1111 Lakeside Ave				
City Cleveland	State OH	Zip Code 44114	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4301</b>	
Purpose of Disbursement Hotel Stay			Amount of Each Disbursement this Period 1192.18	
Candidate Name <b>LEE PAC</b>			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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DoubleTree Cleveland</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2016	
Mailing Address 1111 Lakeside Ave				
City Cleveland	State OH	Zip Code 44114	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4303</b>	
Purpose of Disbursement Hotel Stay			Amount of Each Disbursement this Period 1192.18	
Candidate Name <b>LEE PAC</b>			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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention			
State: District:				

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

2584.36

**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)  
**LEE PAC**

Full Name (Last, First, Middle Initial) <b>A. DoubleTree Cleveland</b>			Date of Disbursement M M / D D / Y Y Y Y Y 07 / 25 / 2016	
Mailing Address 1111 Lakeside Ave			FEC Identification Number C C00573626 <b>Transaction ID : SB21B.4366</b> Amount of Each Disbursement this Period 85.02	
City Cleveland	State OH	Zip Code 44114	Category/Type 002	
Purpose of Disbursement Dinner meeting			Memo Item <input type="checkbox"/>	
Candidate Name <b>LEE PAC</b>			Amount of Each Disbursement this Period 85.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Memo Item <input type="checkbox"/>	
State: _____ District: _____				

Full Name (Last, First, Middle Initial) <b>B. Macadamia Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y Y 08 / 16 / 2016	
Mailing Address 770 P Street NW #405			FEC Identification Number C C00573626 <b>Transaction ID : SB21B.4294</b> Amount of Each Disbursement this Period 500.00	
City Washington	State DC	Zip Code 20001	Category/Type 003	
Purpose of Disbursement National Fundraiser			Memo Item <input type="checkbox"/>	
Candidate Name <b>LEE 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: 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. Renaissance Cleveland Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y Y 08 / 13 / 2016	
Mailing Address 24 Public Square Tower City Center			FEC Identification Number C C00573626 <b>Transaction ID : SB21B.4307</b> Amount of Each Disbursement this Period 1881.04	
City Cleveland	State OH	Zip Code 44113	Category/Type 002	
Purpose of Disbursement Hotel Stay			Memo Item <input type="checkbox"/>	
Candidate Name <b>LEE PAC</b>			Amount of Each Disbursement this Period 1881.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention		Memo Item <input type="checkbox"/>	
State: _____ District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2466.06
<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)  
**LEE PAC**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2016	
Mailing Address P.O. Box 36647-1CR				
City Dallas	State TX	Zip Code 75235	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4296</b>	
Purpose of Disbursement Airfare			Amount of Each Disbursement this Period 1071.92	
Candidate Name <b>LEE PAC</b>			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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Square Inc</b>			Date of Disbursement MM / DD / YYYY 07 / 08 / 2016	
Mailing Address 1455 Market Street Suite 600				
City San Francisco	State CA	Zip Code 94103	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4263</b>	
Purpose of Disbursement Credit Card Fee			Amount of Each Disbursement this Period 175.15	
Candidate Name <b>LEE PAC</b>			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. Square Inc</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2016	
Mailing Address 1455 Market Street Suite 600				
City San Francisco	State CA	Zip Code 94103	FEC Identification Number C00573626 <b>Transaction ID : SB21B.4264</b>	
Purpose of Disbursement Credit Card Fee			Amount of Each Disbursement this Period 175.15	
Candidate Name <b>LEE PAC</b>			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).....	1422.22
<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)  
**LEE PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 165 Jessie Street #2

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Fee

Category/  
Type

Candidate Name  
**LEE PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

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

FEC Identification Number  
**C** C00573626  
**Transaction ID : SB21B.4260**  
Amount of Each Disbursement this Period  
40.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe**

Mailing Address 165 Jessie Street #2

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Fee

Category/  
Type

Candidate Name  
**LEE PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 30 / 2016

FEC Identification Number  
**C** C00573626  
**Transaction ID : SB21B.4261**  
Amount of Each Disbursement this Period  
40.30

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

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)..... ▶

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

80.60  
6553.24

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 61438

M M M	/	D D D	/	Y Y Y Y Y
09		03		2016

City POTOMAC State MD Zip Code 20859

FEC Identification Number

Purpose of Disbursement  
Political Donation

C	C00573626
---	-----------

Candidate Name  
**LEE PAC**

011
Category/ Type

**Transaction ID : SB23.4284**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. BLUM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2728 ASBURY ROAD SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
09		03		2016

City DUBUQUE State IA Zip Code 52001

FEC Identification Number

Purpose of Disbursement  
Political Donation

C	C00573626
---	-----------

Candidate Name  
**LEE PAC**

011
Category/ Type

**Transaction ID : SB23.4269**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**C. BRIAN FITZPATRICK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 939

M M M	/	D D D	/	Y Y Y Y Y
09		03		2016

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

Purpose of Disbursement  
Political Donation

C	C00573626
---	-----------

Candidate Name  
**LEE PAC**

011
Category/ Type

**Transaction ID : SB23.4272**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A. BRIAN MAST FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2600 S DOUGLAS RD STE 900

City CORAL GABLES State FL Zip Code 33134

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 03 / 2016

FEC Identification Number C00573626

Transaction ID : **SB23.4270**

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. DENHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 03 / 2016

FEC Identification Number C00573626

Transaction ID : **SB23.4288**

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. DENHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 24 / 2016

FEC Identification Number C00573626

Transaction ID : **SB23.4364**

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

**A. DON BACON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 391368

City OMAHA State NE Zip Code 68139

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 03 / 2016

FEC Identification Number C00573626

**Transaction ID : SB23.4280**

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. ELISE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 500

City GLENS FALLS State NY Zip Code 12801

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 03 / 2016

FEC Identification Number C00573626

**Transaction ID : SB23.4267**

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. FASO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 448

City KINDERHOOK State NY Zip Code 12106

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 03 / 2016

FEC Identification Number C00573626

**Transaction ID : SB23.4274**

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

**A. GURFEIN FOR AMERICA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 42

City MANHASSET State NY Zip Code 11030

Purpose of Disbursement

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2016

FEC Identification Number: C00573626  
**Transaction ID : SB23.4359**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. JIM BANKS FOR CONGRESS, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2016

FEC Identification Number: C00573626  
**Transaction ID : SB23.4282**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. JUSTIN FAREED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5068

City SANTA BARBARA State CA Zip Code 93105

Purpose of Disbursement Political Donation

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2016

FEC Identification Number: C00573626  
**Transaction ID : SB23.4276**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

**A. JUSTIN FAREED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 5068

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

City SANTA BARBARA State CA Zip Code 93105

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4365**

Amount of Each Disbursement this Period

1700.00
---------

Candidate Name

**LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

**B. MARTINS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 12

M M M	/	D D D	/	Y Y Y Y Y
09		24		2016

City WILLISTON PARK State NY Zip Code 11596

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4360**

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

**C. PAULSEN, ERIK**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
09		03		2016

City EDEN PRAIRIE State MN Zip Code 55344

FEC Identification Number

Purpose of Disbursement  
Political Donation

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4290**

Amount of Each Disbursement this Period

2700.00
---------

Candidate Name

**LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

5400.00
---------

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

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

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

**A. PORTMAN FOR SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9856 ARCHER LANE

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

City DUBLIN State OH Zip Code 43017

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4357**

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name  
**LEE PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

**B. TOM REED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 10847

M M M	/	D D D	/	Y Y Y Y Y
09		03		2016

City ROCHESTER State NY Zip Code 14610

FEC Identification Number

Purpose of Disbursement  
Political Donation

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4265**

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name  
**LEE PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

**C. YODER FOR CONGRESS, INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 26742

M M M	/	D D D	/	Y Y Y Y Y
09		24		2016

City OVERLAND PARK State KS Zip Code 66225

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

**C** C00573626

**Transaction ID : SB23.4362**

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name  
**LEE PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Memo Item

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

4500.00
---------

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

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

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

**A. YOUNG FOR IOWA, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement  011 Category/Type

Candidate Name **LEE PAC**

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

State: District:

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: **C** C00573626  
**Transaction ID : SB23.4355**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22900.00