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Image# 201507209000293505

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typover the lines.	12FE4M5
KelliPAC			
ADDRESS (number and street)	PO Box 11786		
Check if different			
than previously reported. (ACC)	Ft. Mohave		AZ 86427
2. FEC IDENTIFICATION NU	UMBER ▼ C	TY 🛦	STATE ▲ ZIP CODE ▲
C C00572941		IS THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	b 20 (M2) May 20	(Non-Election Year Only)
(a) Quarterly Reports:		ar 20 (M3) Jun 20	(Non-Election Year Only)
April 15 Quarterly Report (0		r 20 (M4) X Jul 20	(M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (C	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (C	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	Float	ion on	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		ion on	in the State of
5. Covering Period 06		through	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined th	nis Report and to the best of	of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	pr Douglas McKee		
Signature of Treasurer Doug	glas McKee	[Electronically Filed]	Date 07 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erron	eous, or incomplete information	on may subject the person sig	gning this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **KelliPAC** 06 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2015 (b) Cash on Hand at 335.00 Beginning of Reporting Period..... 835.00 500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 835.00 835.00 6(a) and 6(c) for Column B)..... 0.00 0.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 835.00 835.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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)

Write or Type Committee Name

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Report Covering the Period: From: 06 01 2015 To: 06 30 2015 COLUMN A COLUMN B			
I. Receipts	Total This Period	Calendar Year-to-Date	
Contributions (other than loans) From:			
(a) Individuals/Persons Other			
Than Political Committees	250.00	500.00	
(i) Itemized (use Schedule A)	200.00	7	
(ii)	250.00	335.00	
(ii) Unitemized	250.00	333.00	
(iii) TOTAL (add	500.00	835.00	
Lines 11(a)(i) and (ii)▶	500.00	033.00	
(b) Delitical Dest. Occurrity	0.00	0.00	
(b) Political Party Committees	7	7	
(c) Other Political Committees	0.00	0.00	
(such as PACs)	7	0.00	
(d) Total Contributions (add Lines			
11(a)(iii), (b), and (c)) (Carry	500.00	835.00	
Totals to Line 33, page 5)	300.00	000.00	
Transfers From Affiliated/Other		0.00	
Party Committees	0.00	0.00	
	0.00	0.00	
All Loans Received	0.00	0.00	
Loan Repayments Received	0.00	0.00	
Offsets To Operating Expenditures			
(Refunds, Rebates, etc.)			
(Carry Totals to Line 37, page 5)	0.00	0.00	
Refunds of Contributions Made			
to Federal Candidates and Other			
Political Committees	0.00	0.00	
Other Federal Receipts			
(Dividends, Interest, etc.)	0.00	0.00	
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	
(5) 25 viii i diido (ilolli oolloddie 110)			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00	
(b) Total Transfers (dad To(d) and To(b))		0.00	
Total Receipts (add Lines 11(d),			
12, 13, 14, 15, 16, 17, and 18(c))▶	500.00	835.00	
Total Federal Receipts			
(subtract Line 18(c) from Line 19) ▶	500.00	835.00	

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating			
	Expenditures	0.00	0.00	
(c) Total Operating Expenditures	000	0.00	
ר פכ	(add 21(a)(i), (a)(ii), and (b))▶ Fransfers to Affiliated/Other Party	0.00	0.00	
	Committees	0.00	0.00	
23. (Contributions to Federal Candidates/Committees	7		
8	and Other Political Committees	0.00	0.00	
	ndependent Expenditures	0.00	0.00	
.'5. (use Schedule E) Coordinated Party Expenditures	0.00	0.00	
{	2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00	
`	,			
26. L	oan Repayments Made	0.00	0.00	
17 I	anna Mada	0.00	0.00	
8. F	_oans MadeRefunds of Contributions_To:	0.00	0.00	
(Individuals/Persons Other Than Political Committees	0.00	0.00	
`	b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
	(such as PACs)	0.00	7 7	
(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c)) ▶	0.00	0.00	
00 (Oth an Dialanna and and	0.00	0.00	
29. (Other Disbursements	0.00	0.00	
30. F	Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
	(from Schedule H6)	0.00	0.00	
	(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	0.00	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
1. 7	Fotal Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00	
	Fotal Federal Disbursements			
	subtract Line 21(a)(ii) and Line 30(a)(ii) rom Line 31)	0.00	0.00	
'	IOIII EIIIG 01)	0.00	5.00	

DETAILED SUMMARY PAGE

of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	500.00	835.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500.00	835.00
3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA

Transaction ID:

Late filing of May 20 and June 20 reports was unavoidable. My wife has been going through some very serious health issues and have been in and out of state. I apologize for any inconvenience that this may have caused.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) KelliPAC Full Name (Last, First, Middle Initial) Howard Ottman Date of Receipt Mailing Address 13535 W. Hyacinth Dr. 2015 15 City State Zip Code Transaction ID: SA11AI.4113 Sun City West ΑZ 85375 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Retired Reired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... 250.00 TOTAL This Period (last page this line number only).....