



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Faith Family Freedom Fund**

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"/>		70136.07
(b) Cash on Hand at Beginning of Reporting Period.....	71160.21	
(c) Total Receipts (from Line 19) .....	40.00	1064.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	71200.21	71200.21
7. Total Disbursements (from Line 31).....	7250.00	7250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	63950.21	63950.21
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	19991.34	

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

**Faith Family Freedom Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30.00	560.00
(ii) Unitemized .....	10.00	504.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40.00	1064.14
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	40.00	1064.14
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	40.00	1064.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40.00	1064.14

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	7250.00	7250.00
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	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7250.00	7250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7250.00	7250.00

**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) .....	40.00	1064.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40.00	1064.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(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)  
**Faith Family Freedom Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Brian R Gardner**

Mailing Address 1500 W North St

City Jackson State MI Zip Code 49202

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

Name of Employer Consumers Energy Occupation Info requested per best efforts

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2015**

**Transaction ID : SA11AI.10869**

Amount of Each Receipt this Period  
**30.00**

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

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

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

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).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>30.00</b>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Faith Family Freedom Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BB&amp;T Financial</b>	Nature of Debt (Purpose): Facebook ads
Mailing Address PO Box 580340	
City State Zip Code Charlotte NC 28258-0340	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.10889</b>	
Amount Incurred This Period 19991.34	Payment This Period 0.00	Outstanding Balance at Close of This Period 19991.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	19991.34
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	19991.34
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	19991.34

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Faith Family Freedom Fund
FEC IDENTIFICATION NUMBER C C00489625
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook [MEMO ITEM]
Mailing Address 1601 Willow Road
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Facebook ad Category/Type 004
Name of Federal Candidate MICHAEL F BENNET Support Oppose
Calendar Year-To-Date Per Election for Office Sought 4998.08

Date of Public Distribution/Dissemination 09 / 15 / 2015
Amount 4998.08
Transaction ID : SE.10883
Date of Disbursement or Obligation
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Facebook [MEMO ITEM]
Mailing Address 1601 Willow Road
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Facebook ad Category/Type 004
Name of Federal Candidate HEIDI HEITKAMP Support Oppose
Calendar Year-To-Date Per Election for Office Sought 4997.70

Date of Public Distribution/Dissemination 09 / 15 / 2015
Amount 4997.70
Transaction ID : SE.10884
Date of Disbursement or Obligation
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Paul Tripodi [Electronically Filed] Date 10 / 19 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Faith Family Freedom Fund
FEC IDENTIFICATION NUMBER C C00489625
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook [MEMO ITEM]
Mailing Address 1601 Willow Road
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Facebook ad Category/Type 004
Name of Federal Candidate JOSEPH S DONNELLY
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 09 / 15 / 2015
Amount 0.00
Transaction ID : SE.10885
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Facebook [MEMO ITEM]
Mailing Address 1601 Willow Road
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Facebook ad Category/Type 004
Name of Federal Candidate ROBERT P JR CASEY
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 09 / 15 / 2015
Amount 0.00
Transaction ID : SE.10886
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: PA
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature Paul Tripodi [Electronically Filed] Date 10 / 19 / 2015

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Faith Family Freedom Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00489625
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Facebook</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>09 / 15 / 2015</b>
Mailing Address 1601 Willow Road	Amount <b>0.00</b>
City State Zip Code Menlo Park CA 94025	<b>Transaction ID : SE.10887</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Facebook ad	Category/Type <b>004</b>
Name of Federal Candidate LISA MURKOWSKI	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>AK</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Strategy Group for Media</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>09 / 15 / 2015</b>
Mailing Address 7669 Stagers Loop	Amount <b>1450.00</b>
City State Zip Code Delaware OH 43015	<b>Transaction ID : SE.10878</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>09 / 23 / 2015</b>
Purpose of Expenditure Ad production	Category/Type <b>004</b>
Name of Federal Candidate MICHAEL F BENNET	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>CO</b>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1450.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

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

*Paul Tripodi*

Signature \_\_\_\_\_ **[Electronically Filed]** Date **10 / 19 / 2015**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Faith Family Freedom Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00489625
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Strategy Group for Media</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 15 / 2015</b>
Mailing Address <b>7669 Stagers Loop</b>	Amount <span style="margin-left: 20px;">1450.00</span>
City <b>Delaware</b> State <b>OH</b> Zip Code <b>43015</b>	<b>Transaction ID : SE.10879</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 23 / 2015</b>
Purpose of Expenditure Ad production	Category/Type <b>004</b>
Name of Federal Candidate <b>HEIDI HEITKAMP</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>ND</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>6447.70</b></span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Strategy Group for Media</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 15 / 2015</b>
Mailing Address <b>7669 Stagers Loop</b>	Amount <span style="margin-left: 20px;">1450.00</span>
City <b>Delaware</b> State <b>OH</b> Zip Code <b>43015</b>	<b>Transaction ID : SE.10880</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 23 / 2015</b>
Purpose of Expenditure Ad production	Category/Type <b>004</b>
Name of Federal Candidate <b>JOSEPH S DONNELLY</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>1450.00</b></span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;"><b>2900.00</b></span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"> </span>

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

*Paul Tripodi* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 19 / 2015**

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Faith Family Freedom Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00489625
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Strategy Group for Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 15 / 2015
Mailing Address 7669 Stagers Loop	Amount <span style="border: 1px solid black; padding: 2px;">1450.00</span>
City State Zip Code Delaware OH 43015	<b>Transaction ID : SE.10881</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 23 / 2015
Purpose of Expenditure Ad production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate ROBERT P JR CASEY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: PA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1450.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Strategy Group for Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 15 / 2015
Mailing Address 7669 Stagers Loop	Amount <span style="border: 1px solid black; padding: 2px;">1450.00</span>
City State Zip Code Delaware OH 43015	<b>Transaction ID : SE.10882</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 23 / 2015
Purpose of Expenditure Ad production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate LISA MURKOWSKI	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: AK
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1450.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">2900.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">7250.00</span>

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

*Paul Tripodi*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
10 / 19 / 2015