

# 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  
**Beehive PAC**

ADDRESS (number and street) 55 N Merchant St, #1516  
 Check if different than previously reported. (ACC) American Fork UT 84003

2. **FEC IDENTIFICATION NUMBER** C00491183 **CITY** **STATE** **ZIP CODE**  
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 M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period 08 / 01 / 2016 through 08 / 31 / 2016

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

Signature of Treasurer Bruce Garfield [Electronically Filed] Date 09 / 14 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Beehive 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="32473.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23364.75"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="13500.00"/>	<input type="text" value="39000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="36864.75"/>	<input type="text" value="71473.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9894.71"/>	<input type="text" value="44503.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26970.04"/>	<input type="text" value="26970.04"/>
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Beehive PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 01 / 2016 To: M M / D D / Y Y Y Y 08 / 31 / 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).....	0.00	1500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	1500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	13500.00	37500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	13500.00	39000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13500.00	39000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13500.00	39000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6394.71	21503.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6394.71	21503.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	22000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1000.00	1000.00
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)) ..	9894.71	44503.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9894.71	44503.12

**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) .....	13500.00	39000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13500.00	39000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6394.71	21503.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6394.71	21503.12

**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 6 OF 20
<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

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)  
**Beehive PAC**

Full Name (Last, First, Middle Initial)  
**A. American Financial Services Assoc PAC**

Mailing Address 919 Eighteenth St. NW, Suite 300

City Washington	State DC	Zip Code 20006-5526
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00038604

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2016

**Transaction ID : A73C529BE757746198A4**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Contribution

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

Mailing Address 4601 North Fairfax Dr., Ste. 1200

City Arlington	State VA	Zip Code 22203-1559
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00572156

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2016

**Transaction ID : A6DDCB5CA079E4FA2A5D**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Contribution

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

Mailing Address 601 New Jersey Ave NW Suite 900

City Washington	State DC	Zip Code 20001-2018
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00360354

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

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
08	/	03	/	2016

**Transaction ID : A35ED68133BEE4F23B4E**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 7 OF 20
<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)  
**Beehive PAC**

**A. BluePAC - Blue Cross and Blue Shield Assoc PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1310 G St. NW 12th Flr  
 City Washington State DC Zip Code 20005-3007  
 FEC ID number of contributing federal political committee. **C** C00194746  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : A9BF4976E559942AF807**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Contribution

**B. Employees of Northrop Grumman Corp PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2980 Fairview Park Dr  
 City Falls Church State VA Zip Code 22042-4511  
 FEC ID number of contributing federal political committee. **C** C00088591  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2016  
**Transaction ID : A3E46E5BA7A414BE4A52**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Contribution

**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  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	13500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Sinclair Services Co**

Mailing Address 550 East South Temple

City State Zip Code  
Salt Lake City UT 84102-1005

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

Transaction ID : B205DE3401A844E6AAA5

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. E.M. Rahal & Company**

Mailing Address Suite 707

City State Zip Code  
Washington DC 20016

Purpose of Disbursement  
Fundraising consultant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

Transaction ID : BB3942F56AFD145CC88E

Amount of Each Disbursement this Period

524.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Authorize.net**

Mailing Address PO Box 947

City State Zip Code  
American Fork UT 84003-0947

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

Transaction ID : B05B40AF5B79E46BAAA6

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

609.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Aristotle**

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2016

Transaction ID : BA4689DC9D79D490A9FF

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Bank**

Mailing Address 88 N University Ave

City Provo State UT Zip Code 84601-4420

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2016

Transaction ID : B46E78105AFAA478F8A7

Amount of Each Disbursement this Period

8.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Jason Chaffetz**

Mailing Address 315 Westfield Cir

City Alpine State UT Zip Code 84004-1594

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2016

Transaction ID : BE296FC8FD1C04A939A5

Amount of Each Disbursement this Period

2184.53

Memo Item

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

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

2417.53

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Costa Vida**

Mailing Address 3700 N Thanksgiving Way, Ste E

City Lehi State UT Zip Code 84043-4108

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : BE8E797C66FA14AACAA7

Amount of Each Disbursement this Period

100.25

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**B. Homestead Resort**

Mailing Address 700 N Homestead Dr.

City Midway State UT Zip Code 84049-6409

Purpose of Disbursement  
B.H. event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : BDA51D0FC7CBE44B4889

Amount of Each Disbursement this Period

51.37

Memo Item  
B.H. event

Full Name (Last, First, Middle Initial)

**C. National Car Rental**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Rental Car

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2016

Transaction ID : B2A04E4538A2B4EE5883

Amount of Each Disbursement this Period

186.63

Memo Item  
Rental Car

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. We, The Pizza**

Mailing Address 305 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2016

Transaction ID : **BC34FD62185DA4B9D8F5**

Amount of Each Disbursement this Period

134.02

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**B. Five Guys**

Mailing Address 1100 New Jersey Ave SE # 110

City Washington State DC Zip Code 20003-3302

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 08 / 2016

Transaction ID : **B8B4B2495C0CD4E7BAA2**

Amount of Each Disbursement this Period

30.52

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**C. Domino's**

Mailing Address 9127 Lee Hwy

City Fairfax State VA Zip Code 22031-1312

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

Transaction ID : **BE8C6AD2622064866A4E**

Amount of Each Disbursement this Period

20.00

Memo Item  
Meals

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Residence Inn by Marriott**

Mailing Address 550 Army Nave Dr

City Arlington State VA Zip Code 22202-2888

Purpose of Disbursement  
Hotel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

Transaction ID : BEC3AA7EC7ED443D1B2D

Amount of Each Disbursement this Period

230.72

Memo Item  
Hotel

Full Name (Last, First, Middle Initial)

**B. Bistro Bis**

Mailing Address 15 E Street NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 12 / 2016

Transaction ID : BD3C1DBDF69E74413A58

Amount of Each Disbursement this Period

80.75

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**C. US House of Representatives**

Mailing Address Longworth House Office Building  
9 Independence Ave SE

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement  
Gifts

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2016

Transaction ID : B912DFEC33A6D4FE1BF6

Amount of Each Disbursement this Period

336.00

Memo Item  
Gifts

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Beehive PAC**

Full Name (Last, First, Middle Initial)

**A. Hyatt Regency Washington**

Mailing Address 400 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2002

Purpose of Disbursement  
Hotel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2016

Transaction ID : B7ECF7F8806D64D278B3

Amount of Each Disbursement this Period

457.08

Memo Item  
Hotel

Full Name (Last, First, Middle Initial)

**B. Central Michel Richard**

Mailing Address 1001 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004-2505

Purpose of Disbursement  
Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

Transaction ID : B4405DD69899243DBB28

Amount of Each Disbursement this Period

197.48

Memo Item  
Event

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 1200 18th St, NW  
Suite 700

City Washington State DC Zip Code 20036-2531

Purpose of Disbursement  
Uber

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

Transaction ID : B107B1A0AEE3047178D7

Amount of Each Disbursement this Period

194.49

Memo Item  
Uber

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Rosa Mexicano**

Mailing Address 153 Waterfront St.

City Oxon Hill State MD Zip Code 20745-1138

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

Transaction ID : **BF5B9E4500D714847A33**

Amount of Each Disbursement this Period

72.92

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**B. Hudson News**

Mailing Address 1 Meadowlands Plaza, East

City East Rutherford State NJ Zip Code 07073-2150

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2016

Transaction ID : **B0A9B35BA79784332AC7**

Amount of Each Disbursement this Period

7.74

Memo Item  
Meals

Full Name (Last, First, Middle Initial)

**C. Ted's Montana Grill**

Mailing Address 2200 Crystal Drive

City Arlington State VA Zip Code 22202-3730

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2016

Transaction ID : **BC51BCBD1137241519F9**

Amount of Each Disbursement this Period

71.69

Memo Item  
Meals

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Jason Chaffetz**

Mailing Address 315 Westfield Cir

City Alpine State UT Zip Code 84004-1594

Purpose of Disbursement  
Reimbursement-see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

Transaction ID : B968FE05EC02B4F0CAF8

Amount of Each Disbursement this Period

2756.85

Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : BD4EF101B79C94679A61

Amount of Each Disbursement this Period

299.10

Memo Item  
Airfare

Full Name (Last, First, Middle Initial)

**C. Delta**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : BA15CAA62EC70491F8F6

Amount of Each Disbursement this Period

540.20

Memo Item  
Airfare

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

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

2756.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. National Car Rental**

Mailing Address 600 Corporate Park Drive

City State Zip Code  
Saint Louis MO 63105-4204

Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 03 / 2016

Transaction ID : B3B92BA10EAE74146BB1

Amount of Each Disbursement this Period

191.87

Memo Item  
Car Rental

Full Name (Last, First, Middle Initial)

**B. National Car Rental**

Mailing Address 600 Corporate Park Drive

City State Zip Code  
Saint Louis MO 63105-4204

Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 13 / 2016

Transaction ID : BE75CAFAB1F104A2F8F2

Amount of Each Disbursement this Period

292.64

Memo Item  
Car Rental

Full Name (Last, First, Middle Initial)

**C. Delta**

Mailing Address 1030 Delta Blvd

City State Zip Code  
Atlanta GA 30354-1989

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2016

Transaction ID : BB80968F45A594776AC3

Amount of Each Disbursement this Period

296.10

Memo Item  
Airfare

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. The Broadmoor**

Mailing Address 1 Lake Avenue  
PO Box 1439

City Colorado Springs State CO Zip Code 80906-4269

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2016

Transaction ID : B681A61DCB2FF45ABA76

Amount of Each Disbursement this Period

1050.80

Memo Item  
Lodging

Full Name (Last, First, Middle Initial)

**B. Jason Chaffetz**

Mailing Address 315 Westfield Cir

City Alpine State UT Zip Code 84004-1594

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : B0F01349FECCD459E8ED

Amount of Each Disbursement this Period

611.33

Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 55 N Merchant St.

City American Fork State UT Zip Code 84003-7068

Purpose of Disbursement  
Mailbox Rental

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 03 / 2016

Transaction ID : B007D9F49E57D4376968

Amount of Each Disbursement this Period

130.00

Memo Item  
Mailbox Rental

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

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

611.33

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Seasons Gallery Art & Frame**

Mailing Address 195 E 200 N

City Alpine State UT Zip Code 84004-1625

Purpose of Disbursement Framing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

Transaction ID : **BDCCA69E252FA4713BE0**

Amount of Each Disbursement this Period

155.80

Memo Item Framing

Full Name (Last, First, Middle Initial)

**B. Seasons Gallery Art & Frame**

Mailing Address 195 E 200 N

City Alpine State UT Zip Code 84004-1625

Purpose of Disbursement Framing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

Transaction ID : **B0533785EE93B48D5A6F**

Amount of Each Disbursement this Period

325.53

Memo Item Framing

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

0.00

6394.71

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Jeff Duncan for Congress**

Mailing Address PO Box 845

City Laurens State SC Zip Code 29360-0845

Purpose of Disbursement  
Contribution

Candidate Name  
**Jeff Duncan**

Office Sought:  House  
 Senate  
 President  
State: SC District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 02 / 2016

Transaction ID : **B544CCB74D9174699A2F**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jim Banks for Congress**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Contribution

Candidate Name  
**Jim Banks**

Office Sought:  House  
 Senate  
 President  
State: IN District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2016

Transaction ID : **BB5169BADC2AE413FBAE**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Billy Long for Congress**

Mailing Address 3246 E Ridgeview

City Springfield State MO Zip Code 65804-4076

Purpose of Disbursement  
Contribution

Candidate Name  
**Billy Long**

Office Sought:  House  
 Senate  
 President  
State: MO District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2016

Transaction ID : **B2567ADF2BC6D4193969**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2500.00

2500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Committee to Elect Dan Hemmert

Mailing Address 1115 E 965 N

City Orem State UT Zip Code 84097-4371

Purpose of Disbursement  
Contribution to State Candidate

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : BB9CB54CE973347D5A8A

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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

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

1000.00
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1000.00
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