

**FEC  
FORM 3P**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE  
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

RECEIVED  
FEC MAIL CENTER

2016 OCT 12 PM 12:11  
Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines. 12FE4M5

ALAN KEYES FOR PRESIDENT '96, INC.

ADDRESS (number and street)

4700 SURRY PLACE

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

CITY

VA

STATE

22304

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C 00303214

3. THIS REPORT IS FOR Primary or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- |   |                                 |             |             |              |              |
|---|---------------------------------|-------------|-------------|--------------|--------------|
| <input checked="" type="checkbox"/> April 15 (Q1) | October 15 (Q3)                 | Feb 20 (M2) | May 20 (M5) | Aug 20 (M8)  | Nov 20 (M11) |
| July 15 (Q2)                                      | January 31 Year-End Report (YE) | Mar 20 (M3) | Jun 20 (M6) | Sep 20 (M9)  | Dec 20 (M12) |
|   |                                 | Apr 20 (M4) | Jul 20 (M7) | Oct 20 (M10) | Jan 31 (YE)  |

Thirtieth day report following the General Election

M M / D D / Y Y Y Y

on

Twelfth day report preceding election

M M / D D / Y Y Y Y

on

in the State of

Is this Report an Amendment?

yes no

5. Covering Period

07 / 01 / 2016

through

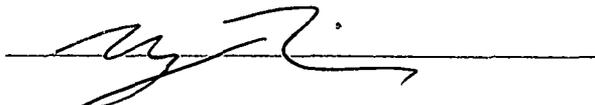
09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARY PARKER LEWIS ASST. TREASURER

Signature of Treasurer



Date

10 / 01 / 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. All previous versions of this form are obsolete and should no longer be used.

Office  
Use  
Only

Write or Type Committee Name

ALAN KEYES FOR PRESIDENT '96, INC.

Report Covering the Period: From: 07 / 01 / 2016 To: 09 / 30 / 2016

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	0 00
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	0 00
8. SUBTOTAL (Lines 6 and 7) .....	0 00
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	0 00
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	0 00
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0 00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	186,874 00
13. EXPENDITURES SUBJECT TO LIMITATION .....	0 00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	0 00
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	0 00

NOT FOR FINANCIAL STATEMENTS

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

Page 3

NAME OF COMMITTEE (in Full)

**ALAN KEYES FOR PRESIDENT '96, INC.**

Report Covering the Period: From:

**07<sup>M</sup> / 01<sup>D</sup> / 2016<sup>Y</sup>**

To:

**09<sup>M</sup> / 30<sup>D</sup> / 2016<sup>Y</sup>**

**I. RECEIPTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

16. FEDERAL FUNDS (Itemize on Schedule A-P).....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized.....		
(ii) unitemized.....		
(iii) Total contributions.....		
(b) Political Party Committees.....		
(c) Other Political Committees.....		
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)).....	0.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate.....		
(b) Other Loans.....		
(c) TOTAL LOANS (Add 19(a) and 19(b)).....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating.....	0.00	0.00
(b) Fundraising.....		
(c) Legal and Accounting.....		
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)).....		
21. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21).....	0.00	0.00

20161011 001210000000



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

**ALAN KEYES FOR PRESIDENT '96, INC.**

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

N/A

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / 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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only).....

0.00

NOT TO BE REPRODUCED

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**ALAN KEYES FOR PRESIDENT '96, INC.**

Full Name (Last, First, Middle Initial)

<b>A.</b>		N/A		Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City		State	Zip Code	
Purpose of Disbursement				Amount of Each Disbursement this Period
Candidate Name		Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

<b>B.</b>		Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City		State	Zip Code	
Purpose of Disbursement				Amount of Each Disbursement this Period
Candidate Name		Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

<b>C.</b>		Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City		State	Zip Code	
Purpose of Disbursement				Amount of Each Disbursement this Period
Candidate Name		Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

Subtotal Of Receipts This Page (optional)..... **0 00**

Total This Period (last page this line number only)..... **0 00**

20110310 10:10:00 AM

SCHEDULE D-P

ALAN KEYES FOR PRESIDENT '96, INC.  
DEBTS AND OBLIGATIONS  
EXCLUDING LOANS

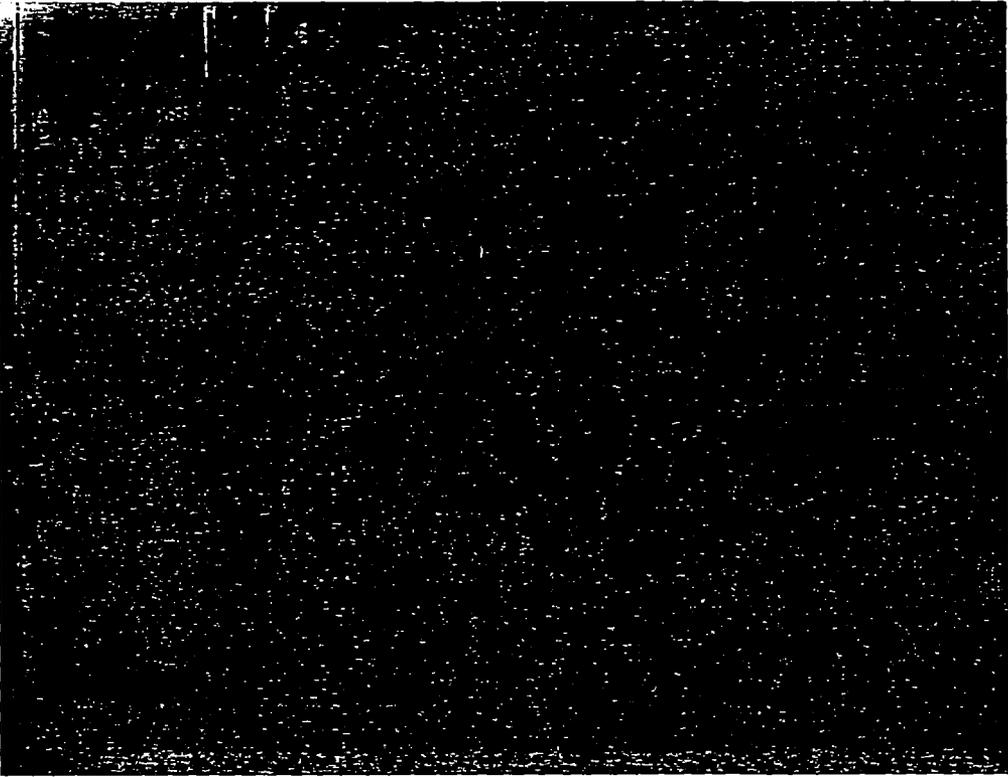
LINE #12

NAME OF COMMITTEE	PURPOSE OF DISBURSEMENT	OUTSTDG BALANCE BEGINNING	AMOUNT INCURRED THIS PERIOD	PAYMENT	OUTSDG BALANCE ENDING
	PRIMARY				
POLITECHS, INC. 4700 SURRY PLACE ALEXANDRIA, VA 27304	PROFESSIONAL FEES	\$ 84,103.92			\$ 84,103.92
	PRIMARY				
ALAN L. KEYES - 1 13533 SCOTTISH AUTUMN LN DARNESTOWN, MD 20878	CANDIDATE LOAN TO COMMITTEE	\$ 5,000.00			\$ 5,000.00
	PRIMARY				
DAN GODZICH 1515 SO. EXTENSION, #201A MESA, AZ 85010	PROFESSIONAL FEES	\$ 8,750.00			\$ 8,750.00
	PRIMARY				
QMG - 4 C/O BAASEIAH 7554 SAND STREET FORT WORTH, TX	FUNDRAISING EXPENSE	\$ 55,388.39			\$ 55,388.39
	PRIMARY				
SOUTHWEST POLICY GROUP 2907 N SECOND STREET PHOENIX, AZ 85012	CAMPAIGN CONSULTING SERVICES	\$ 9,300.00			\$ 9,300.00
	PRIMARY				
TGS COMPUTER SYSTEMS 4165 W CROCUS PHOENIX, AZ 85023	DATA SERVICES	\$ 23,752.69			\$ 23,752.69
	PRIMARY				
AIRBOURNE EXPRESS	DELIVERY SERVICE	\$ 579.88			\$ 579.88
TOTALS		\$ 186,874.88	\$ -	\$ -	\$ 186,874.88

Alan Keyes for President 96  
4700 Surry Place  
Alexandria, VA 22304

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt
Postmarked <i>10-03-2016</i>	<i>10-12-2016</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*BWS*  
 PREPARER

*10-12-2016*  
 DATE PREPARED

2016-10-12 10:00:00 AM