

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Brookshire Grocery Company PAC

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

1-800-438-6848

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="9,390.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5,049.12"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="0.00"/>	<input type="text" value="1,000.00"/>
(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="5,049.12"/>	<input type="text" value="10,390.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4,012.03"/>	<input type="text" value="9,353.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1,037.09"/>	<input type="text" value="1,037.09"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Brookshire Grocery Company PAC

Report Covering the Period: From:

10 / 01 / 2014

To:

10 / 15 / 2014

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0.00

0.00

0.00

1,000.00

0.00

0.00

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.00

1,000.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0.00

1,000.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.00

1,000.00

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	12.03	103.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12.03	103.48
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,000.00	9,250.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	4,000.00	9,250.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4,012.03	9,353.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	4,012.03	9,353.48

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)	0.00	1,000.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	12.03	103.48
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12.03	103.48

**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)

PAGE 1 OF 4

<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

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)

Brookshire Grocery Company PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
10	02	2014

A.

Grocers PAC

Mailing Address

1005 N. Glebe Rd, Suite 250

City

Arlington

State

VA

Zip Code

22201

Purpose of Disbursement

PAC to PAC Contribution

011

Amount of Each Disbursement this Period

Candidate Name

N/A

Category/
Type

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

FED PAC to FED PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
10	02	2014

B.

TX Senator Robert Nichols Campaign

Mailing Address

P.O. BOX 2347

City

Jacksonville

State

TX

Zip Code

75766

Purpose of Disbursement

General Campaign Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Robert Nichols

Category/
Type

500.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: TX

District:

TX State Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
10	02	2014

C.

TX House Speaker Joe Strauss Campaign

Mailing Address

P.O. BOX 90388

City

San Antonio

State

TX

Zip Code

75209

Purpose of Disbursement

General Campaign Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Joe Strauss

Category/
Type

500.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: TX

District:

TX State House

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

2,000.00

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)

PAGE 2 OF 4

<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)

Brookshire Grocery Company PAC

Full Name (Last, First, Middle Initial)

A. TX Representative Matt Schaefer Campaign

Date of Disbursement

Mailing Address
P.O. BOX 7191

MM / DD / YYYY	10 / 02 / 2014
----------------	----------------

City State Zip Code
Tyler TX 75711

Purpose of Disbursement

General Campaign Contribution

011
Category/ Type

Amount of Each Disbursement this Period

250.00

Candidate Name

Matt Schaefer

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX

District:

TX State House

Full Name (Last, First, Middle Initial)

B. Travis for Texas

Date of Disbursement

Mailing Address
209 E. Main Street

MM / DD / YYYY	10 / 02 / 2014
----------------	----------------

City State Zip Code
Nacogdoches TX 75961

Purpose of Disbursement

General Campaign Contribution

011
Category/ Type

Amount of Each Disbursement this Period

250.00

Candidate Name

Travis Clardy

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX

District:

TX State House

Full Name (Last, First, Middle Initial)

C. TX Representative David Simpson Campaign

Date of Disbursement

Mailing Address
P.O. BOX 5100

MM / DD / YYYY	10 / 02 / 2014
----------------	----------------

City State Zip Code
Longview TX 75608

Purpose of Disbursement

General Campaign Contribution

011
Category/ Type

Amount of Each Disbursement this Period

250.00

Candidate Name

David Simpson

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX

District:

TX State House

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

750.00

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)						PAGE 4 OF 4
	<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)
Brookshire Grocery Company PAC

Full Name (Last, First, Middle Initial) A. TX Representative John Raney Campaign		Date of Disbursement MM / DD / YYYY 10 / 02 / 2014
Mailing Address P.O. BOX 11461		Amount of Each Disbursement this Period 250.00
City College Station	State TX	
Zip Code 77842-1461		Category/ Type 011
Purpose of Disbursement General Campaign Contribution		
Candidate Name John Raney		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ TX State House	
State: TX	District:	

Full Name (Last, First, Middle Initial) B. TX Representative Byron Cook		Date of Disbursement MM / DD / YYYY 10 / 02 / 2014
Mailing Address P.O. BOX 1397		Amount of Each Disbursement this Period 250.00
City Corsicana	State TX	
Zip Code 75151		Category/ Type 011
Purpose of Disbursement General Campaign Contribution		
Candidate Name Byron Cook		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ TX State House	
State: TX	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type 011
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District:	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	4,000.00

FROM FORM 3X

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PO ZIP Code 75701	Day of Delivery Next <input type="checkbox"/> 1st <input checked="" type="checkbox"/> 2nd <input type="checkbox"/> 3rd	Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Date Accepted 10/23/14	Scheduled Date of Delivery Month 10 Day 25	Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time Accepted 4:48	Scheduled Time of Delivery Morning <input checked="" type="checkbox"/> Noon <input type="checkbox"/> 3 PM	Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Flat Rate <input type="checkbox"/> or Weight 5 lbs.	Postage \$ 19.99	Delivery Attempt Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
	Return Receipt Fee \$		
	COD Fee \$		
	Insurance Fee \$		
	Total Postage & Fees \$ 19.99		
	Acceptance Fee \$		

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PO BOX 1411
Tyler, TX 75710

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Washington, DC. ~~20003~~

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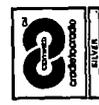
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Federal Election Commission
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<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 10/23/14
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<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


PREPARER
(8/2013)

10/24/14
DATE PREPARED

12041 11/11/14 09:30