



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Congressional House Republicans In Service PAC (CHRIS PAC)**

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2014"/>  | <input type="text" value="0.00"/>     | <input type="text" value="0.00"/>     |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="0.00"/>     |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="20000.00"/> | <input type="text" value="20000.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="20000.00"/> | <input type="text" value="20000.00"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="18073.60"/> | <input type="text" value="18073.60"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="1926.40"/>  | <input type="text" value="1926.40"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Write or Type Committee Name

**Congressional House Republicans In Service PAC (CHRIS PAC)**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 15000.00                      | 15000.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 15000.00                      | 15000.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 5000.00                       | 5000.00                           |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 20000.00                      | 20000.00                          |
| 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))..... ▶                        | 20000.00                      | 20000.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 20000.00                      | 20000.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 2073.60                       | 2073.60                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2073.60                       | 2073.60                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 16000.00                      | 16000.00                          |
| 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 .....  | 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)) ..      | 18073.60                      | 18073.60                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 18073.60                      | 18073.60                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 20000.00                      | 20000.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 20000.00                      | 20000.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ▶ | 2073.60                       | 2073.60                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶               | 2073.60                       | 2073.60                           |

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Please note: The Committee has demonstrated the necessary steps to establish best efforts to obtain and disclose the full identification of all individuals who contribute in excess of \$200 in a calendar year. These efforts include a clear request with the original solicitation, followed by a Request for Missing Information Letter, which clearly asks for the missing information, without soliciting a contribution. In addition, the letter reads: Federal law requires us to make our best efforts to collect and report the name, mailing address, occupation and name of employer for individuals who contribute in excess of \$200 in a calendar year. We then enclose a self-address envelope and include a telephone number to reach the committee with any questions.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 16  
(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)  
**Congressional House Republicans In Service PAC (CHRIS PAC)**

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

Mailing Address 667 Mourning Dove Drive

City State Zip Code  
 Sarasota FL 34236

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

Name of Employer Occupation  
 Information Requested Information Requested

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  
 03 / 17 / 2014  
**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 155 Nottingham Terrace

City State Zip Code  
 Buffalo NY 14216

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

Name of Employer Occupation  
 Information Requested Information Requested

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  
 02 / 06 / 2014  
**Transaction ID : SA11AI.4111**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 6230 Old Lake Shore Road

City State Zip Code  
 Lake View NY 14065

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

Name of Employer Occupation  
 Information Requested Information Requested

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  
 03 / 17 / 2014  
**Transaction ID : SA11AI.4149**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00

**TOTAL** 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 8 OF 16  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input 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)  
**Congressional House Republicans In Service PAC (CHRIS PAC)**

**A. William Hudson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 670 Lagoon Road  
City Vero Beach State FL Zip Code 32963  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
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  
02 / 03 / 2014  
**Transaction ID : SA11AI.4110**  
Amount of Each Receipt this Period  
2500.00

**B. Paul C. Steinwachs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4125 Gulf of Mexico Drive Unit S202  
City Longboat Key State FL Zip Code 34226  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
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  
03 / 06 / 2014  
**Transaction ID : SA11AI.4145**  
Amount of Each Receipt this Period  
2500.00

**C. Paul C. Steinwachs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4125 Gulf of Mexico Drive Unit S202  
City Longboat Key State FL Zip Code 34226  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : SA11AI.4146**  
Amount of Each Receipt this Period  
2500.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7500.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 15000.00 |

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

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

FOR LINE NUMBER: PAGE 9 OF 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional House Republicans In Service PAC (CHRIS PAC)**

**A. Every Republican Is Crucial (ERIC) PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 East Main Street  
 Suite 200  
 City Richmond State VA Zip Code 23219  
 FEC ID number of contributing federal political committee. **C** C00384701  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11C.4116**  
 Amount of Each Receipt this Period  
 5000.00

**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).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 5000.00 |

**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)

**Congressional House Republicans In Service PAC (CHRIS PAC)**

Full Name (Last, First, Middle Initial)

**A. Air Charter Team, Inc.**

Mailing Address 4151 North Mulberry Drive  
Suite 250

City Kansas City State MO Zip Code 64116

Purpose of Disbursement  
PAC Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4113**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4103**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
PAC Compliance Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4104**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

**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)

**Congressional House Republicans In Service PAC (CHRIS PAC)**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
SEE MEMO ITEMS

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : SB21B.4141**

Amount of Each Disbursement this Period

625.00

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC Compliance Consulting

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : SB21B.4142**

Amount of Each Disbursement this Period

500.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Federal Express (FedEx)**

Mailing Address 3965 Airways  
Module G 4th Floor

City State Zip Code  
Memphis TN 38114

Purpose of Disbursement  
PAC Express Shipping

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2014

**Transaction ID : SB21B.4107**

Amount of Each Disbursement this Period

19.26

**[MEMO ITEM]**

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

625.00

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

**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)  
**Congressional House Republicans In Service PAC (CHRIS PAC)**

Full Name (Last, First, Middle Initial)

**A. Richard Springer**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4105**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Richard Springer**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
PAC Treasurer Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4143**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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



**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)

**Congressional House Republicans In Service PAC (CHRIS PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of David Jolly**

Mailing Address PO Box 1158

City Indian Rocks Beach State FL Zip Code 33785

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**David Jolly**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Special-General

State: FL District: 13

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

**Transaction ID : SB23.4101**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Frank Guinta**

Mailing Address PO Box 877

City Manchester State NH Zip Code 03105

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**Frank Guinta**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2014

**Transaction ID : SB23.4136**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Jenkins for Congress**

Mailing Address PO Box 727

City Huntington State WV Zip Code 25711

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**Evan Jenkins**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District: 03

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2014

**Transaction ID : SB23.4137**

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

**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)

**Congressional House Republicans In Service PAC (CHRIS PAC)**

Full Name (Last, First, Middle Initial)

**A. McSally for Congress**

Mailing Address PO Box 19128

City Tucson State AZ Zip Code 85731

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Martha McSally**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : SB23.4134**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Full Name (Last, First, Middle Initial)

**B. Michael Grimm for Congress**

Mailing Address PO Box 61806

City Staten Island State NY Zip Code 10306

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Michael Grimm**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 6 |   | 2 | 0 | 1 | 4 |

**Transaction ID : SB23.4162**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Full Name (Last, First, Middle Initial)

**C. Ryan Costello for Congress**

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Ryan Costello**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 3 |   | 2 | 0 | 1 | 4 |

**Transaction ID : SB23.4140**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

