



**SUMMARY PAGE**

of Receipts and Disbursements

Write or Type Committee Name  
**FRIENDS OF JOHN MCCAIN, INC.**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	0.00	11612854.23
(b) Total Contribution Refunds (from Line 20(d)) ..	-127.50	101404.16
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	127.50	11511450.07
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	313494.08	11195098.56
(b) Total Offsets to Operating Expenditures (from Line 14)...	8653.88	9343.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	304840.20	11185755.01
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	421864.64	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	

**For further information contact:**

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

Toll Free 800-424-9530  
 Local 202-694-1100

201701100200008546

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

**FRIENDS OF JOHN MCCAIN, INC.**

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="MM 11"/> / <input type="text" value="DD 08"/> / <input type="text" value="YYYY 2016"/> (date of general election)	COLUMN C Total for <input type="text" value="MM 11"/> / <input type="text" value="DD 09"/> / <input type="text" value="YYYY 2016"/> (date after general election)  through <input type="text" value="MM 12"/> / <input type="text" value="DD 31"/> / <input type="text" value="YYYY 2016"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="0.00"/>	<input type="text" value="8418136.55"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="0.00"/>	<input type="text" value="911355.44"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="0.00"/>	<input type="text" value="9329491.99"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="47800.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="2235562.24"/>	<input type="text" value="0.00"/>

201701100200008547

# POST-ELECTION DETAILED SUMMARY PAGE

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>(d) The Candidate</b>		
0.00	0.00	0.00
<b>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))</b>		
0.00	11612854.23	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>		
0.00	1656338.47	0.00
<b>13. LOANS:</b>		
<b>(a) Made or Guaranteed by the Candidate</b>		
0.00	0.00	0.00
<b>(b) All Other Loans</b>		
0.00	0.00	0.00
<b>(c) TOTAL LOANS (add Lines 13(a) and (b))</b>		
0.00	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)</b>		
8653.88	9343.55	8653.88
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>		
14280.55	1203330.40	14280.55
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>		
22934.43	14481866.65	22934.43

201701100200008548

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

**FRIENDS OF JOHN MCCAIN, INC.**

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2016

To:

MM / DD / YYYY  
12 / 31 / 2016

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
313494.08	11195098.56	313494.08
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	86964.00	0.00
(b) Political Party Committees		
-127.50	14140.16	-127.50

201701100200008549

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	300.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

-127.50	101404.16	-127.50
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21. OTHER DISBURSEMENTS

127.50	348201.02	127.50
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

313494.08	11644703.74	313494.08
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

127.50	11511450.07	127.50
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

304840.20	11185755.01	304840.20
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	712424.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)...	22934.43
25. SUBTOTAL (add Line 23 and Line 24)...	735358.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	313494.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	421864.64

20170110020008550

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**HAZEN, THOMAS, N., MR.,**

Mailing Address 20 BAYON DRIVE  
APT 130

City SOUTH HADLEY	State MA	Zip Code 01075-3340
----------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
5400.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2016

Transaction ID : SA11A.3121419

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HAZEN, JANE, C., MRS.,**

Mailing Address 20 BAYON DR APT 130

City SOUTH HADLEY	State MA	Zip Code 01075-3340
----------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
800.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2016

Transaction ID : SA11A.3121624

Amount of Each Receipt this Period  
800.00

Memo Item  
CONTRIBUTION  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**HAZEN, THOMAS, N., MR.,**

Mailing Address 20 BAYON DRIVE  
APT 130

City SOUTH HADLEY	State MA	Zip Code 01075-3340
----------------------	-------------	------------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
5400.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2016

Transaction ID : SA11A.3121625

Amount of Each Receipt this Period  
-800.00

Memo Item  
CONTRIBUTION  
REATTRIBUTION TO SPOUSE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00

20170110020000854

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

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

FOR LINE NUMBER: PAGE 8 OF 62  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**GRIFFIN PARTNERS, PARKWAY FOUNTAIN, L.P.**

Mailing Address 1702 E HIGHLAND AVE, SUITE 313

City PHOENIX State AZ Zip Code 85016

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **8653.88**

Date of Receipt  
**12 / 28 / 2016**

Transaction ID : SA14.1

Amount of Each Receipt this Period  
**8653.88**

Memo Item  
**REFUND-RENT DEPOSIT**

**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

Amount of Each Receipt this Period

Memo Item

**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

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... **8653.88**

**TOTAL** This Period (last page this line number only) ..... **8653.88**

201701100200008552



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 62			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

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

Mailing Address 16301 KELLY WOODS DR #206

City <b>FT MYERS</b>	State <b>FL</b>	Zip Code <b>33908</b>
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FEC ID number of contributing federal political committee. **C** [ ]

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **175213.35**

Date of Receipt: **12 / 28 / 2016**

Transaction ID : SA15.1

Amount of Each Receipt this Period: **14280.55**

Memo Item  
LIST RENTAL INCOME

**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: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: [ ]

Memo Item

**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: [ ] / [ ] / [ ]

Amount of Each Receipt this Period: [ ]

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>14280.55</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>14280.55</b>

201701100200008855

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. BAGGS, BLAZE,**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 5034.64

Transaction ID : SB17B.12

Memo Item

**B. FRANQUIST, KATHERINE,**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 5398.76

Transaction ID : SB17B.44

Memo Item

**C. GOETZ, ZACHARY,**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND AVE

City PHOENIX State AZ Zip Code 85201

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 1586.08

Transaction ID : SB17B.69

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... 12019.48

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

201701100200008554

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. HALLISEY, TAMARA,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement PAYROLL		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 1809.97	
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:	Transaction ID : SB17B.61		
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. HALLISEY, TAMARA,</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement PAYROLL		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 1809.97	
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:	Transaction ID : SB17B.62		
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HALLISEY, TAMARA,</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement PAYROLL		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 1809.97	
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:	Transaction ID : SB17B.63		
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	5429.91
<b>TOTAL</b> This Period (last page this line number only)...	

20170110020000855

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. HIGH, ALEXANDRA,**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 805.20

Transaction ID : SB17B.2

Memo Item

**B. JOHNSON, AMBER,**

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 6130.54

Transaction ID : SB17B.3

Memo Item

**C. JOHNSON, AMBER,**

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
12 / 15 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 3138.44

Transaction ID : SB17B.4

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... ▶ 10074.18

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

201701100200008558

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. JOHNSON, AMBER,</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115		FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3138.44
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17B.5
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>B. LEDOUX, SAM,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 2914.77
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17B.58
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C. LEFLER, DYLAN,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 4824.39
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17B.27
Candidate Name			<input type="checkbox"/> Memo Item
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 Disbursements This Page (optional)...	10877.60
TOTAL This Period (last page this line number)...	

201701100200008557

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. MILLIKEN, ALEX,**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 3223.39

Transaction ID : SB17B.1

Memo Item

**B. PACHECO, JONATHAN,**

Full Name (Last, First, Middle Initial)

Mailing Address 1109 OAKVIEW DRIVE

City SILVER SPRING State MD Zip Code 20903

Purpose of Disbursement LOGISTICS CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 90.70

Transaction ID : SB17B.43

Memo Item

**C. PACHECO, JONATHAN,**

Full Name (Last, First, Middle Initial)

Mailing Address 1109 OAKVIEW DRIVE

City SILVER SPRING State MD Zip Code 20903

Purpose of Disbursement VOID-TRAVEL ORG CK DATE 9/29/16

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
12 / 02 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: -90.70

Transaction ID : SB17B.73

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... 3223.39

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

20170110020000358

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 62			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. PARRISH, ANTHONY,</b>				Date of Disbursement MM / DD / YYYY 12 / 08 / 2016			
Mailing Address 205 N JUDD DR				FEC Identification Number C			
City BISBEE	State AZ	Zip Code 85603	Amount of Each Disbursement this Period 357.50 Transaction ID : SB17B.8 <input type="checkbox"/> Memo Item				
Purpose of Disbursement SECURITY						Category/Type	
Candidate Name			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:					

Full Name (Last, First, Middle Initial) <b>B. PEREIRA, ANA,</b>				Date of Disbursement MM / DD / YYYY 11 / 30 / 2016			
Mailing Address 1702 E HIGHLAND				FEC Identification Number C			
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 4323.64 Transaction ID : SB17B.7 <input type="checkbox"/> Memo Item				
Purpose of Disbursement PAYROLL						Category/Type	
Candidate Name			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:					

Full Name (Last, First, Middle Initial) <b>C. PHILLIPS, TOBY,</b>				Date of Disbursement MM / DD / YYYY 11 / 30 / 2016			
Mailing Address 1702 E HIGHLAND				FEC Identification Number C			
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 4874.89 Transaction ID : SB17B.67 <input type="checkbox"/> Memo Item				
Purpose of Disbursement PAYROLL						Category/Type	
Candidate Name			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 Disbursements This Page (optional)...			9556.03
TOTAL This Period (last page this line number only)...			

2017011002000088549

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. PURPURA, SALVATORE,</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement PAYROLL		<input type="checkbox"/> Category/Type	
Candidate Name		Amount of Each Disbursement this Period 251.42	
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:	Transaction ID : SB17B.56		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. PURPURA, SALVATORE,</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 228 S WASHINGTON ST STE 115			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement PAYROLL		<input type="checkbox"/> Category/Type	
Candidate Name		Amount of Each Disbursement this Period 251.42	
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:	Transaction ID : SB17B.57		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. ROMERO, LORNA,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND			
City PHOENIX	State AZ	Zip Code 85016	
Purpose of Disbursement PAYROLL		<input type="checkbox"/> Category/Type	
Candidate Name		Amount of Each Disbursement this Period 4395.83	
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:	Transaction ID : SB17B.45		
<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	4898.67
<b>TOTAL</b> This Period (last page this line number)...	

20170110020000850



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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. SHADEGG, STEPHEN,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 8677.16
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17B.60
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>B. STANIFORTH, MARGARET,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND AVE		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85701	Amount of Each Disbursement this Period 2870.01
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17B.46
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C. WHICKER, JARRED,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1702 E HIGHLAND		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 4541.64
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17B.42
Candidate Name			<input type="checkbox"/> Memo Item
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>SUBTOTAL</b> of Disbursements This Page (optional)...	16088.81
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008501

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
74.15

Transaction ID : SB17B.6

Memo Item

**B. ARIZONA DEPARTMENT OF REVENUE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 29079

City PHOENIX State AZ Zip Code 85038

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 24 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
469.00

Transaction ID : SB17B.9

Memo Item

**C. ATCHLEY & ASSOCIATES LLP**

Full Name (Last, First, Middle Initial)  
Mailing Address 1005 LA POSADA DR

City AUSTIN State TX Zip Code 78752

Purpose of Disbursement  
ACCOUNTING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 27 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1087.00

Transaction ID : SB17B.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... ▶▶▶ 1630.15

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

201701100200008562

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. AZ DEPARTMENT OF REVENUE**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 52138**

City **PHOENIX** State **AZ** Zip Code **85072**

Purpose of Disbursement **PAYROLL TAXES**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **11 / 30 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **1674.91**

Transaction ID: **SB17B.11**

Memo Item

**B. BRADLEY PATRICK GROUP LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address **1020 N FAIRFAX ST**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement **FINANCE CONSULTING/TRAVEL**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **12 / 20 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **632.20**

Transaction ID: **SB17B.13**

Memo Item

**C. BUSE CONSULTING LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address **11 S CENTRAL AVE**

City **PHOENIX** State **AZ** Zip Code **85004**

Purpose of Disbursement **POLITICAL STRATEGY CONSULTING**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **11 / 30 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **42500.00**

Transaction ID: **SB17B.14**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)... **44807.11**

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

20170110020000359

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. CAMPAIGN SOLUTIONS**

Full Name (Last, First, Middle Initial)  
Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
12 / 16 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 7383.98

Transaction ID : SB17B.15

Memo Item

**B. CAPITAL CITY PARTNERS LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 143 MARTIN LN

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
12 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 7500.00

Transaction ID : SB17B.16

Memo Item

**C. CAPITOL TECHNOLOGY SOLUTIONS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 43909

City WASHINGTON State DC Zip Code 20010

Purpose of Disbursement COMPUTER SUPPORT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 6593.73

Transaction ID : SB17B.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)...

21477.71

TOTAL This Period (last page this line number)...

201701100200008564

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address <b>ONE THOMAS CIR NW STE 1100</b>			
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005</b>	
Purpose of Disbursement <b>LEGAL CONSULTING</b>		<input type="checkbox"/>	
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:	Amount of Each Disbursement this Period <b>17388.76</b>	
Transaction ID : <b>SB17B.18</b>		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address <b>ONE THOMAS CIR NW STE 1100</b>			
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005</b>	
Purpose of Disbursement <b>LEGAL CONSULTING</b>		<input type="checkbox"/>	
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:	Amount of Each Disbursement this Period <b>7500.00</b>	
Transaction ID : <b>SB17B.19</b>		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address <b>1445 A LAUGHLIN AVE</b>			
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101</b>	
Purpose of Disbursement <b>BANK FEE</b>		<input type="checkbox"/>	
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:	Amount of Each Disbursement this Period <b>238.35</b>	
Transaction ID : <b>SB17B.20</b>		<input type="checkbox"/> Memo Item	

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

**25127.11**

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

201701100200008555

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. CITY OF BULLHEAD CITY</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address PO BOX 23189		FEC Identification Number C
City BULLHEAD CITY	State AZ	Zip Code 86439
Purpose of Disbursement SECURITY	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 200.70	
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) ▼	Transaction ID : SB17B.21
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4313.36	
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) ▼	Transaction ID : SB17B.22
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2000.00	
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) ▼	Transaction ID : SB17B.23
State: District:	<input type="checkbox"/> Memo Item	

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

6514.06

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

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201701100200008566

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 12 / 29 / 2016	
Mailing Address 1593 SPRING HILL RD		FEC Identification Number C	
City TYSONS CORNER	State VA	Zip Code 22182	Amount of Each Disbursement this Period 4002.29
Purpose of Disbursement DATABASE MANAGEMENT		Category/ Type	Transaction ID : SB17B.24
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>B. COCHISE COUNTY SHERIFF'S OFFICE</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2016	
Mailing Address 205 N JUDD DR		FEC Identification Number C	
City BISBEE	State AZ	Zip Code 85603	Amount of Each Disbursement this Period 32.50
Purpose of Disbursement SECURITY		Category/ Type	Transaction ID : SB17B.25
Candidate Name			<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C. DEPARTMENT OF THE TREASURY</b>		Date of Disbursement MM / DD / YYYY 12 / 28 / 2016	
Mailing Address IRS SERVICE CENTER		FEC Identification Number C	
City OGDEN	State UT	Zip Code 84201	Amount of Each Disbursement this Period 24752.00
Purpose of Disbursement TAXES		Category/ Type	Transaction ID : SB17B.26
Candidate Name			<input type="checkbox"/> Memo Item
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 Disbursements This Page (optional)...

28786.79

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

201701100200008567

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)  
**A. ELEMENT CAPITAL MANAGEMENT LLC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2016

Mailing Address **600 LEXINGTON AVE**

FEC Identification Number

C	_____
---	-------

City **NEW YORK** State **NY** Zip Code **10022**

Amount of Each Disbursement this Period

_____	150.00
-------	--------

Purpose of Disbursement  
**FACILITY RENTAL**

_____
-------

Candidate Name

Category/  
Type

Transaction ID : **SB17B.28**

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Full Name (Last, First, Middle Initial)  
**B. EVENTS BY SHOW STOPPERS**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		29		2016

Mailing Address **PO BOX 3744**

FEC Identification Number

C	_____
---	-------

City **SEDONA** State **AZ** Zip Code **86340**

Amount of Each Disbursement this Period

_____	2102.87
-------	---------

Purpose of Disbursement  
**EVENT CONSULTING**

_____
-------

Candidate Name

Category/  
Type

Transaction ID : **SB17B.29**

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

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

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2016

Mailing Address **PO BOX 2340**

FEC Identification Number

C	_____
---	-------

City **OMAHA** State **NE** Zip Code **68103**

Amount of Each Disbursement this Period

_____	25672.26
-------	----------

Purpose of Disbursement  
**CREDIT CARD PAYMENT**

_____
-------

Candidate Name

Category/  
Type

Transaction ID : **SB17B.30**

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

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

_____	27925.13
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**TOTAL** This Period (last page this line number)...

_____	
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201701100200008558



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. A&amp;E REPROGRAPHICS</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 100 ARAGONA BLVD			
City VIRGINIA BEACH	State VA	Zip Code 23462	
Purpose of Disbursement PRINTING		Category/Type	
Candidate Name		Amount of Each Disbursement this Period 53.31	
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:	Transaction ID : SB17B.101		
		<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ADVANTAGE MAIL</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 1258 W SOUTHERN AVE STE 102			
City TEMPE	State AZ	Zip Code 85282	
Purpose of Disbursement PRINTING		Category/Type	
Candidate Name		Amount of Each Disbursement this Period 3510.00	
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:	Transaction ID : SB17B.102		
		<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON.COM</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address PO BOX 821226			
City SEATTLE	State WA	Zip Code 98108	
Purpose of Disbursement EQUIPMENT PURCHASE		Category/Type	
Candidate Name		Amount of Each Disbursement this Period 1376.98	
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:	Transaction ID : SB17B.103		
		<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008559

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address <b>PO BOX 582820 MD 766</b>			
City <b>TULSA</b>	State <b>OK</b>	Zip Code <b>74158</b>	
Purpose of Disbursement <b>TRAVEL</b>		FEC Identification Number <b>C</b>	
Candidate Name		Amount of Each Disbursement this Period <b>460.16</b>	
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:	Transaction ID : <b>SB17B.104</b>		
<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN VALET</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address <b>8902 N CENTRAL AVE</b>			
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85020</b>	
Purpose of Disbursement <b>TRAVEL</b>		FEC Identification Number <b>C</b>	
Candidate Name		Amount of Each Disbursement this Period <b>175.00</b>	
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:	Transaction ID : <b>SB17B.139</b>		
<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. ASSURED DOCUMENT DESTRUCTION</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address <b>7225 W ROOSEVELT ST</b>			
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85043</b>	
Purpose of Disbursement <b>SHREDDING</b>		FEC Identification Number <b>C</b>	
Candidate Name		Amount of Each Disbursement this Period <b>39.95</b>	
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:	Transaction ID : <b>SB17B.105</b>		
<input checked="" type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008570

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. BILLS PIZZA</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 107 S CORTEZ ST		FEC Identification Number C
City PRESCOTT	State AZ	Zip Code 86303
Purpose of Disbursement FOOD AND BEVERAGES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 50.03	
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:	Transaction ID : SB17B.106 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHICAGO CUBS BASEBALL CLUB LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 2330 W RIO SALADO PKWY		FEC Identification Number C
City MESA	State AZ	Zip Code 85201
Purpose of Disbursement FACILITY RENTAL/CATERING/JANITORIAL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1912.49	
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:	Transaction ID : SB17B.100 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHICK-FIL-A</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 03191 16TH ST		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85008
Purpose of Disbursement FOOD AND BEVERAGES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 318.13	
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:	Transaction ID : SB17B.107 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008571

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. CIRCLE K**

Mailing Address PO BOX 52085

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

58.90

Transaction ID : SB17B.108

Memo Item

**B. CLASSIC PARTY RENTALS**

Mailing Address 3103 E BROADWAY

City PHOENIX State AZ Zip Code 85040

Purpose of Disbursement  
EQUIPMENT LEASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

6106.28

Transaction ID : SB17B.109

Memo Item

**C. COX BUSINESS COMMUNICATIONS**

Mailing Address PO BOX 53249

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

495.07

Transaction ID : SB17B.110

Memo Item

SUBTOTAL of Disbursements This Page (optional)...

0.00

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

201701100200008572

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. DOLLAR RADIO RENTALS**

Full Name (Last, First, Middle Initial)  
Mailing Address **4824 S 35TH ST**

City **PHOENIX** State **AZ** Zip Code **85040**

Purpose of Disbursement  
**EQUIPMENT LEASE**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **11 / 29 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **100.32**

Transaction ID: **SB17B.117**

Memo Item

**B. DOMINOS PIZZA 761**

Full Name (Last, First, Middle Initial)  
Mailing Address **914 E CAMELBACK RD STE 10**

City **PHOENIX** State **AZ** Zip Code **85034**

Purpose of Disbursement  
**FOOD AND BEVERAGES**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **11 / 29 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **18.92**

Transaction ID: **SB17B.111**

Memo Item

**C. DUNKIN DONUTS #346373-PHONEIX**

Full Name (Last, First, Middle Initial)  
Mailing Address **2322 E THOMAS RD**

City **PHOENIX** State **AZ** Zip Code **85016**

Purpose of Disbursement  
**FOOD AND BEVERAGES**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **11 / 29 / 2016**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **119.03**

Transaction ID: **SB17B.112**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... **0.00**

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

201701100200008573

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. ENTERPRISE-RENT-A-CAR--1444</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 1444 W AUTO DR		FEC Identification Number C
City TEMPE	State AZ	Zip Code 85284
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4042.02	
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:	Transaction ID : SB17B.113 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GIANT RUSTIC PIZZA</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 3945 E CAMELBACK RD		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85018
Purpose of Disbursement FOOD AND BEVERAGES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 32.91	
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:	Transaction ID : SB17B.114 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GRAPHIC IDEALS</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 4631 E THOMAS RD		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85018
Purpose of Disbursement PRINTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 116.86	
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:	Transaction ID : SB17B.115 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008574

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. HOTELS.COM</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 333 108TH AVE NE		FEC Identification Number C
City BELLEVUE	State WA	Zip Code 98004
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 169.28	
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:	Transaction ID : SB17B.116 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. JACKSONS CAR WASH</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 2501 W HAPPY VALLEY RD		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85027
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 17.10	
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:	Transaction ID : SB17B.118 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MARINO'S MOB BURGERS</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 113 S CORTEZ		FEC Identification Number C
City PRESCOTT	State AZ	Zip Code 86303
Purpose of Disbursement FOOD AND BEVERAGES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 334.83	
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:	Transaction ID : SB17B.119 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

20170110020000857

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. MCDONALDS-85013</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 750 W CAMELBACK RD		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85013	Amount of Each Disbursement this Period 2.15
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type	Transaction ID : SB17B.120
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. PIZZA HUT PHOENIX</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 5832 N 16TH ST		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85016	Amount of Each Disbursement this Period 226.59
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type	Transaction ID : SB17B.121
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. POTBELLY</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 1 E WASHINGTON ST		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85004	Amount of Each Disbursement this Period 94.26
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type	Transaction ID : SB17B.123
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008576



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. PRESCOTT BREWING CO</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address 130 W FURLEY					
City PRESCOTT		State AZ	Zip Code 86301		
Purpose of Disbursement FOOD AND BEVERAGES				Category/ Type	
Candidate Name					
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:		<input checked="" type="checkbox"/> Memo Item			

FEC Identification Number

C

Amount of Each Disbursement this Period

296.52

Transaction ID : SB17B.124

Full Name (Last, First, Middle Initial) <b>B. PRICELINE HOTELS</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address HQ OFFICE					
City NORWALK		State CT	Zip Code 06850		
Purpose of Disbursement TRAVEL				Category/ Type	
Candidate Name					
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:		<input checked="" type="checkbox"/> Memo Item			

FEC Identification Number

C

Amount of Each Disbursement this Period

120.94

Transaction ID : SB17B.122

Full Name (Last, First, Middle Initial) <b>C. QT 435 PHOENIX</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address 1610 E HIGHLAND AVE					
City PHOENIX		State AZ	Zip Code 85016		
Purpose of Disbursement TRAVEL				Category/ Type	
Candidate Name					
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:		<input checked="" type="checkbox"/> Memo Item			

FEC Identification Number

C

Amount of Each Disbursement this Period

81.25

Transaction ID : SB17B.125

SUBTOTAL of Disbursements This Page (optional)...

0.00

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

201701100200008577

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. SAFEWAY STORE MESA</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address 1225 W GUADALUPE RD			FEC Identification Number C		
City MESA	State AZ	Zip Code 85202	Amount of Each Disbursement this Period 19.07		
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type	Transaction ID : SB17B.126		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Memo Item		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. SHELL OIL-77067</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address 12700 NORTHBOROUGH			FEC Identification Number C		
City HOUSTON	State TX	Zip Code 77067	Amount of Each Disbursement this Period 16.33		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17B.127		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Memo Item		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. SNAPCHAT</b>			Date of Disbursement MM / DD / YYYY 11 / 29 / 2016		
Mailing Address 63 MARKET ST			FEC Identification Number C		
City VENICE	State CA	Zip Code 90291	Amount of Each Disbursement this Period 33.83		
Purpose of Disbursement WEB ADS		Category/ Type	Transaction ID : SB17B.128		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Memo Item		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008578

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. STAPLES</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 963 NORLAND AVE		FEC Identification Number C	
City CHAMBERSBURG	State PA	Zip Code 17201	Amount of Each Disbursement this Period 17.37
Purpose of Disbursement PAPER	Candidate Name		Transaction ID : SB17B.129
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. STARBUCKS-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 2824 N 44TH ST		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85001	Amount of Each Disbursement this Period 37.15
Purpose of Disbursement FOOD AND BEVERAGES	Candidate Name		Transaction ID : SB17B.130
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. THE MCMILLIAN</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 2 HISTORIC RTE 66		FEC Identification Number C	
City FLAGSTAFF	State AZ	Zip Code 86001	Amount of Each Disbursement this Period 64.37
Purpose of Disbursement FOOD AND BEVERAGES	Candidate Name		Transaction ID : SB17B.131
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008579

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. THE PATIO RESTAURANT</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 3347 N 7TH AVE		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85013	Amount of Each Disbursement this Period 1982.08
Purpose of Disbursement FACILITY RENTAL/CATERING		Category/ Type	Transaction ID : SB17B.132
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. THE WEATHERFORD HOTEL</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 23 N LEROUX ST		FEC Identification Number C	
City FLAGSTAFF	State AZ	Zip Code 86001	Amount of Each Disbursement this Period 1116.76
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17B.133
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016	
Mailing Address 706 MISSION ST		FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 45.99
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17B.134
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008888

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. UHAUL RENTAL PHOENIX</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 2727 N CENTRAL AVE		FEC Identification Number C
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 131.46
Candidate Name		Transaction ID : SB17B.135
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VIA ADVENTURES</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 300 GROGAN AVE		FEC Identification Number C
City MERCED	State CA	
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 1781.00
Candidate Name		Transaction ID : SB17B.138
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WALGREENS 85016</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 1616 E THOMAS RD		FEC Identification Number C
City PHOENIX	State AZ	
Purpose of Disbursement FOOD AND BEVERAGES		Amount of Each Disbursement this Period 8.11
Candidate Name		Transaction ID : SB17B.136
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional) ...

0.00

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

20170110@200008581

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 3721 E THOMAS RD

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement  
FOOD AND BEVERAGES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

89.46

Transaction ID : SB17B.137

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

5891.79

Transaction ID : SB17B.31

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address PO BOX 582820 MD 766

City TULSA State OK Zip Code 74158

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

521.02

Transaction ID : SB17B.153

Memo Item

SUBTOTAL of Disbursements This Page (optional)...

5891.79

TOTAL This Period (last page this line number)...

201701100200008582



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 62			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. EMBASSY SUITES PHOENIX</b>		Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>29</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			29			2016			
M	M	/	D	D	/	Y	Y	Y	Y													
11			29			2016																
Mailing Address <b>2630 E CAMELBACK RD</b>																						
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016</b>																				
Purpose of Disbursement <b>TRAVEL</b>		Category/ Type <input type="checkbox"/>																				
Candidate Name																						
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: _____	Amount of Each Disbursement this Period <b>257.79</b>																					
		Transaction ID : <b>SB17B.157</b>																				
		<input checked="" type="checkbox"/> Memo Item																				

Full Name (Last, First, Middle Initial) <b>B. FEDEX.COM</b>		Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>29</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			29			2016			
M	M	/	D	D	/	Y	Y	Y	Y													
11			29			2016																
Mailing Address <b>100 FED EX DR</b>																						
City <b>CORAOPOLIS</b>	State <b>PA</b>	Zip Code <b>15108</b>																				
Purpose of Disbursement <b>DELIVERY</b>		Category/ Type <input type="checkbox"/>																				
Candidate Name																						
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: _____	Amount of Each Disbursement this Period <b>452.65</b>																					
		Transaction ID : <b>SB17B.158</b>																				
		<input checked="" type="checkbox"/> Memo Item																				

Full Name (Last, First, Middle Initial) <b>C. HEARD MUSEUM</b>		Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>29</td><td></td><td></td><td>2016</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			29			2016			
M	M	/	D	D	/	Y	Y	Y	Y													
11			29			2016																
Mailing Address <b>2301 N CENTRAL AVE</b>																						
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004</b>																				
Purpose of Disbursement <b>FACILITY RENTAL/CATERING</b>		Category/ Type <input type="checkbox"/>																				
Candidate Name																						
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: _____	Amount of Each Disbursement this Period <b>1534.58</b>																					
		Transaction ID : <b>SB17B.159</b>																				
		<input checked="" type="checkbox"/> Memo Item																				

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	→	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number)...	→	

201701100200008584



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. MACNAIR TRAVEL AGENCY</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 4100 FAIRFAX DR STE 600		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22203
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 140.00	
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:	Transaction ID : SB17B.152 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MYFAX SERVICES</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 6922 HOLLYWOOD BLVD #800		FEC Identification Number C
City LOS ANGELES	State CA	Zip Code 90028
Purpose of Disbursement PHONE SVC	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 10.00	
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:	Transaction ID : SB17B.160 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SANCTUARY ON CAMELBACK</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 5700 E MCDONALD DR		FEC Identification Number C
City PARADISE VALLEY	State AZ	Zip Code 85253
Purpose of Disbursement FACILITY RENTAL/CATERING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1284.49	
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:	Transaction ID : SB17B.161 <input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)...	0.00
TOTAL This Period (last page this line number only)...	

20170110020000858

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 62			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. ULINE**

Full Name (Last, First, Middle Initial)

Mailing Address ULINE DR

City PLEASANT PRAIRIE State WI Zip Code 53158

Purpose of Disbursement BOXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 29 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 170.23

Transaction ID : SB17B.162

Memo Item

**B. FIRST BANKCARD**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 2419.58

Transaction ID : SB17B.32

Memo Item

**C. AMAZON.COM**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 821226

City SEATTLE State WA Zip Code 98108

Purpose of Disbursement BOXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 43.69

Transaction ID : SB17B.143

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... ▶▶▶ 2419.58

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

201701100200008586

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 43 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN PRINTHOUSE</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 2205 E UNIVERSITY DR		FEC Identification Number C
City PHOENIX	State AZ	
Purpose of Disbursement PRINTING		Category/ Type
Candidate Name		
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CREATSEND.COM</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 217 2ND ST		FEC Identification Number C
City SAN FRANCISCO	State CA	
Purpose of Disbursement WEB ADS		Category/ Type
Candidate Name		
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DAILY STAR</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 4850 S PARK AVE		FEC Identification Number C
City TUCSON	State AZ	
Purpose of Disbursement WEB ADS		Category/ Type
Candidate Name		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008587

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2016

Mailing Address 1 HACKER WAY

FEC Identification Number

C	_____
---	-------

City MENLO PARK State CA Zip Code 94205

Amount of Each Disbursement this Period

_____	637.58
-------	--------

Purpose of Disbursement  
WEB ADS

_____
-------

Transaction ID : SB17B.144

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2016

Mailing Address 1600 AMPHITHEATRE PKWY

FEC Identification Number

C	_____
---	-------

City MOUNTAIN VIEW State CA Zip Code 94043

Amount of Each Disbursement this Period

_____	8.72
-------	------

Purpose of Disbursement  
WEB ADS

_____
-------

Transaction ID : SB17B.146

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. HYATT HOTELS PHOENIX**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2016

Mailing Address 122 N 2ND ST

FEC Identification Number

C	_____
---	-------

City PHOENIX State AZ Zip Code 85004

Amount of Each Disbursement this Period

_____	-1144.96
-------	----------

Purpose of Disbursement  
CREDIT-TRAVEL

_____
-------

Transaction ID : SB17B.142

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

_____	0.00
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**TOTAL** This Period (last page this line number)...

_____	
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201701100200008388

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. THOMAS GRAPHICS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 142226

City AUSTIN State TX Zip Code 78714

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 215.00

Transaction ID : SB17B.148

Memo Item

**B. FIRST BANKCARD**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 15520.04

Transaction ID : SB17B.33

Memo Item

**C. ADOBE**

Full Name (Last, First, Middle Initial)  
Mailing Address 151 S ALMADEN BLVD

City SAN JOSE State CA Zip Code 95101

Purpose of Disbursement SOFTWARE PURCHASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 192.02

Transaction ID : SB17B.164

Memo Item

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

15520.04

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

201701100200008589

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON.COM</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address PO BOX 821226			
City SEATTLE	State WA	Zip Code 98108	
Purpose of Disbursement EQUIPMENT PURCHASE		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number

C

Amount of Each Disbursement this Period

181.36

Transaction ID : SB17B.165

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address PO BOX 9001309			
City LOUISVILLE	State KY	Zip Code 40290	
Purpose of Disbursement PHONE SVC		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number

C

Amount of Each Disbursement this Period

1083.95

Transaction ID : SB17B.166

Full Name (Last, First, Middle Initial) <b>C. BOUCHON BISTRO</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address 235 N CANON DR			
City BEVERLY HILLS	State CA	Zip Code 90210	
Purpose of Disbursement FACILITY RENTAL/CATERING		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number

C

Amount of Each Disbursement this Period

879.49

Transaction ID : SB17B.167

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

0.00

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

201701100200008590

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. CAIRO WINE &amp; LIQUOR</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 1618 17TH ST BW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement BEVERAGES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 185.72	
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:	Transaction ID : SB17B.168 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CAREY INTERNATIONAL INC</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 4530 WISCONSIN AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20016
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 582.10	
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:	Transaction ID : SB17B.169 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. INTUIT</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016
Mailing Address 2632 MARINE WAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement PRINTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 227.34	
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:	Transaction ID : SB17B.170 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008591

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. LOWES HOTEL-NEW YORK</b>		Date of Disbursement <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>667 MADISON AVE</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10065</b>
Purpose of Disbursement <b>FACILITY RENTAL/CATERING/TRAVEL</b>		FEC Identification Number <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
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) ▼	Transaction ID : <b>SB17B.172</b>
State: _____ District: _____	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MENUS CATERING WASHINGTON DC</b>		Date of Disbursement <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>5458 3RD ST NE</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20011</b>
Purpose of Disbursement <b>CATERING</b>		FEC Identification Number <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
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) ▼	Transaction ID : <b>SB17B.173</b>
State: _____ District: _____	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MYFAX SERVICES</b>		Date of Disbursement <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>6922 HOLLYWOOD BLVD #800</b>		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>LOS ANGELES</b>	State <b>CA</b>	Zip Code <b>90028</b>
Purpose of Disbursement <b>PHONE SVC</b>		FEC Identification Number <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
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) ▼	Transaction ID : <b>SB17B.171</b>
State: _____ District: _____	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	<input type="text"/>
<b>TOTAL</b> This Period (last page this line number only)...	<input type="text"/>

201701100200008592



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. OFFICE DEPOT-PHOENIX**

Full Name (Last, First, Middle Initial)  
Mailing Address 602 63RD AVE

City PHOENIX State AZ Zip Code 85043

Purpose of Disbursement  
TONER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
181.19

Transaction ID : SB17B.174

Memo Item

**B. SEDONA GOLF RESORT**

Full Name (Last, First, Middle Initial)  
Mailing Address 35 RIDGE TRAIL DR

City SEDONA State AZ Zip Code 08631

Purpose of Disbursement  
FACILITY RENTAL/CATERING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
5206.34

Transaction ID : SB17B.175

Memo Item

**C. STAPLES**

Full Name (Last, First, Middle Initial)  
Mailing Address 963 NORLAND AVE

City CHAMBERSBURG State PA Zip Code 17201

Purpose of Disbursement  
BOXES/PAPER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number  
C

Amount of Each Disbursement this Period  
195.63

Transaction ID : SB17B.176

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ... 0.00

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

201701100200008593

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. ULINE</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address ULINE DR		FEC Identification Number C	
City PLEASANT PRAIRIE	State WI	Zip Code 53158	Amount of Each Disbursement this Period 437.15
Purpose of Disbursement BOXES		Category/Type	Transaction ID : SB17B.177
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. US POSTAL SERVICE</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address 2825 LONE PKWY		FEC Identification Number C	
City EAGAN	State MN	Zip Code 55121	Amount of Each Disbursement this Period 189.75
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : SB17B.178
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. FLAGS OF VALOR</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 44200 WAXPOOL RD		FEC Identification Number C	
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 8000.00
Purpose of Disbursement FLAGS		Category/Type	Transaction ID : SB17B.34
Candidate Name		<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	8000.00
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008594

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. FLOWERS &amp; PLANTS ETC</b>			Date of Disbursement MM / DD / YYYY 12 / 20 / 2016		
Mailing Address 1378 CHAIN BRIDGE RD					
City MCLEAN		State VA	Zip Code 22101		
Purpose of Disbursement FLORAL EXPENSE					<input type="checkbox"/>
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:	Amount of Each Disbursement this Period 212.00 Transaction ID : SB17B.35 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. INSPERITY</b>			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016		
Mailing Address 19001 CRESCENT SPRINGS DR					
City KINGWOOD		State TX	Zip Code 77339		
Purpose of Disbursement PAYROLL SVC-INSUR-TAXES					<input type="checkbox"/>
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:	Amount of Each Disbursement this Period 6203.18 Transaction ID : SB17B.36 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. INSPERITY</b>			Date of Disbursement MM / DD / YYYY 12 / 15 / 2016		
Mailing Address 19001 CRESCENT SPRINGS DR					
City KINGWOOD		State TX	Zip Code 77339		
Purpose of Disbursement PAYROLL SVC-INSUR-TAXES					<input type="checkbox"/>
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:	Amount of Each Disbursement this Period 1811.99 Transaction ID : SB17B.37 <input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	8227.17
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008595

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

City  
KINGWOOD

State  
TX

Zip Code  
77339

Purpose of Disbursement  
PAYROLL SVC-INSUR-TAXES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1918.44

Transaction ID : SB17B.38

Memo Item

**B. INTERNAL REVENUE SERVICE**

Mailing Address PO BOX 970011

City  
ST LOUIS

State  
MO

Zip Code  
63197

Purpose of Disbursement  
PAYROLL TAXES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

31668.43

Transaction ID : SB17B.39

Memo Item

**C. INTERNAL REVENUE SERVICE**

Mailing Address PO BOX 970011

City  
ST LOUIS

State  
MO

Zip Code  
63197

Purpose of Disbursement  
PAYROLL TAXES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2088.67

Transaction ID : SB17B.40

Memo Item

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

35675.54

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

201701100200008596

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address PO BOX 970011

City ST LOUIS State MO Zip Code 63197

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 30 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2088.67

Transaction ID : SB17B.41

Memo Item

Full Name (Last, First, Middle Initial)

**B. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 30 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

655.12

Transaction ID : SB17B.47

Memo Item

Full Name (Last, First, Middle Initial)

**C. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 15 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

282.02

Transaction ID : SB17B.48

Memo Item

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

3025.81

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

201701100200008597

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. MD COMPTROLLER**

Mailing Address **80 CALVERT ST**

City **ANNAPOLIS** State **MD** Zip Code **21401**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

**12 / 30 / 2016**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**282.02**

Transaction ID : **SB17B.49**

Memo Item

**B. NC DEPT OF REVENUE**

Mailing Address **501 N WILMINGTON ST**

City **RALEIGH** State **NC** Zip Code **27604**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

**12 / 15 / 2016**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**18.00**

Transaction ID : **SB17B.50**

Memo Item

**C. NC DEPT OF REVENUE**

Mailing Address **501 N WILMINGTON ST**

City **RALEIGH** State **NC** Zip Code **27604**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

**12 / 30 / 2016**

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**18.00**

Transaction ID : **SB17B.51**

Memo Item

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

**318.02**

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

**318.02**

201701190200008598

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. NYS TAX DEPARTMENT</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address <b>WA HARRIMAN CAMPUS</b>		FEC Identification Number C	
City <b>ALBANY</b>	State <b>NY</b>	Zip Code <b>12227</b>	Amount of Each Disbursement this Period 199.98
Purpose of Disbursement <b>PAYROLL TAXES</b>		Category/ Type	Transaction ID : <b>SB17B.52</b>
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. NYS TAX DEPARTMENT</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address <b>WA HARRIMAN CAMPUS</b>		FEC Identification Number C	
City <b>ALBANY</b>	State <b>NY</b>	Zip Code <b>12227</b>	Amount of Each Disbursement this Period 199.98
Purpose of Disbursement <b>PAYROLL TAXES</b>		Category/ Type	Transaction ID : <b>SB17B.53</b>
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. NYS TAX DEPARTMENT</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address <b>WA HARRIMAN CAMPUS</b>		FEC Identification Number C	
City <b>ALBANY</b>	State <b>NY</b>	Zip Code <b>12227</b>	Amount of Each Disbursement this Period 199.98
Purpose of Disbursement <b>PAYROLL TAXES</b>		Category/ Type	Transaction ID : <b>SB17B.54</b>
Candidate Name		<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	599.94
<b>TOTAL</b> This Period (last page this line number only)...	

201701100200008599

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. PAULA LEDUC FINE CATERING**

Mailing Address 1350 PARK AVE

City EMERYVILLE State CA Zip Code 94608

Purpose of Disbursement  
VOID-CATERING ORG CK DATE 9/17/16

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 02 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

-291.89

Transaction ID : SB17B.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. PF INVESTMENTS**

Mailing Address 1802 N. 11TH AVENUE

City PHOENIX State AZ Zip Code 85007

Purpose of Disbursement  
VOID-RENT DEPOSIT ORG CK DATE 5/16/16

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 02 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

-650.00

Transaction ID : SB17B.72

Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT COUNTRY LISTS**

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 08 / 2016

FEC Identification Number

C

Amount of Each Disbursement this Period

434.07

Transaction ID : SB17B.55

Memo Item

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

-507.82

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

201701100200008600



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 62

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. SNELL &amp; WILMER LLP</b>		Date of Disbursement MM / DD / YYYY <b>12 / 14 / 2016</b>	
Mailing Address <b>ONE ARIZONA CENTER</b>		FEC Identification Number <b>C</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004</b>	Amount of Each Disbursement this Period <b>148.50</b>
Purpose of Disbursement <b>LEGAL CONSULTING</b>		Transaction ID : <b>SB17B.59</b>	
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. TARGETED VICTORY</b>		Date of Disbursement MM / DD / YYYY <b>12 / 08 / 2016</b>	
Mailing Address <b>1033 N FAIRFAX ST</b>		FEC Identification Number <b>C</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	Amount of Each Disbursement this Period <b>95.00</b>
Purpose of Disbursement <b>WEB SERVICE</b>		Transaction ID : <b>SB17B.64</b>	
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. THE HALLISEY GROUP</b>		Date of Disbursement MM / DD / YYYY <b>12 / 08 / 2016</b>	
Mailing Address <b>38 E 85TH ST, STE 5E</b>		FEC Identification Number <b>C</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10028</b>	Amount of Each Disbursement this Period <b>5000.00</b>
Purpose of Disbursement <b>FINANCE CONSULTING</b>		Transaction ID : <b>SB17B.65</b>	
Candidate Name		<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional) ...	▶	<b>5243.50</b>
<b>TOTAL</b> This Period (last page this line number only) ...	▶	

201701100200008601

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. THE HALLISEY GROUP</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address <b>38 E 85TH ST, STE 5E</b>			
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10028</b>	
Purpose of Disbursement <b>TRAVEL</b>		Category/Type <input type="checkbox"/>	
Candidate Name			
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:	Amount of Each Disbursement this Period 570.20 Transaction ID : <b>SB17B.66</b> <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. VERIZON-25505</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address <b>PO BOX 25505</b>			
City <b>LEHIGH VALLEY</b>	State <b>PA</b>	Zip Code <b>18002</b>	
Purpose of Disbursement <b>PHONE SVC</b>		Category/Type <input type="checkbox"/>	
Candidate Name			
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:	Amount of Each Disbursement this Period 74.18 Transaction ID : <b>SB17B.68</b> <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Category/Type <input type="checkbox"/>	
Candidate Name			
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:	Amount of Each Disbursement this Period  Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	644.38
<b>TOTAL</b> This Period (last page this line number only)...	313494.08

201701100200008602

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. BLACK, CHARLIE,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 601 N FAIRFAX ST, #402		FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20B.2
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. BLACK, CHARLIE,</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 601 N FAIRFAX ST, #402		FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period -1000.00
Purpose of Disbursement VOID-CONTRIBUTION REFUND ORG CK DATE 3/29/16		Category/ Type	Transaction ID : SB20B.5
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. BLOOM, BRADLEY,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 11 ALBION RD		FEC Identification Number C	
City WELLESLEY	State MA	Zip Code 02481	Amount of Each Disbursement this Period 2700.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20B.1
Candidate Name		<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	2700.00
<b>TOTAL</b> This Period (last page this line number)...	

201701100200008602

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. BLOOM, BRADLEY,</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 11 ALBION RD		FEC Identification Number C	
City WELLESLEY	State MA	Zip Code 02481	Amount of Each Disbursement this Period -2700.00
Purpose of Disbursement VOID-CONTRIBUTION REFUND ORG CK DATE 5/28/16		Category/ Type	Transaction ID : SB20B.4
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>B. KHANI, KHALIL,</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 1872 E ALAMEDA DR		FEC Identification Number C	
City TEMPE	State AZ	Zip Code 85282	Amount of Each Disbursement this Period -100.00
Purpose of Disbursement VOID-CONTRIBUTION REFUND ORG CK DATE 10/11/16 TO US TREASURY		Category/ Type	Transaction ID : SB20B.6
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C. RUS, RUTH,</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 3813 E AMELIA AVE		FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85018	Amount of Each Disbursement this Period -20.00
Purpose of Disbursement VOID-CONTRIBUTION REFUND ORG CK DATE 11/2/15 TO US TREASURY		Category/ Type	Transaction ID : SB20B.7
Candidate Name		<input type="checkbox"/> Memo Item	
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>SUBTOTAL</b> of Disbursements This Page (optional)...	-2820.00
<b>TOTAL</b> This Period (last page this line number only)...	

20170110020008604

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. SCHRANZ, AVI,</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address NORPAC		FEC Identification Number C
City ENGLEWOOD CLIFFS	State NJ	
Zip Code 07632		Amount of Each Disbursement this Period -7.50
Purpose of Disbursement VOID-CONTRIBUTION REFUND ORG CK DATE 3/23/16 TO US TREASURY		
Candidate Name		Transaction ID : SB20B.3
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:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	
Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	
Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ...	-7.50
<b>TOTAL</b> This Period (last page this line number only) ...	-127.50

201701100200008605

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

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

FOR LINE NUMBER: PAGE 62 OF 62  
(check only one)  

<input type="checkbox"/>	17	<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 checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)  
**A. US DEPT OF TREASURY**

Mailing Address **FINANCIAL MANAGEMENT SERVICES**

City **HYATTSVILLE** State **MD** Zip Code **20787**

Purpose of Disbursement  
**DISGORGEMENT OF UNCLEARED CONTRIBUTION REFUNDS**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**12 / 28 / 2016**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**127.50**

Transaction ID : **SB29B.1**

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

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

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

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional)...	127.50
<b>TOTAL</b> This Period (last page this line number only)...	127.50

201701100200002605

Faxed  
or  
Hand Delivered

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 1-9-17  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

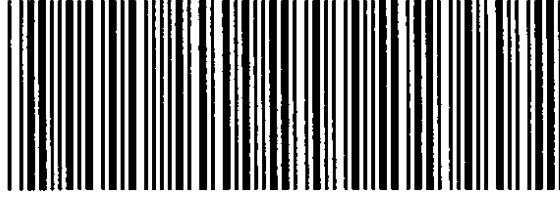
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

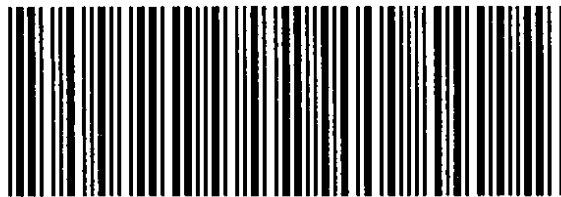
PREPARER DH DATE PREPARED 1-9-17

201701100200008608





SEN PATCH



SEN PATCH

201710110020008600