

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BILL PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="230661.70"/>	<input type="text" value="230661.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="145460.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="75500.00"/>	<input type="text" value="486397.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="220960.96"/>	<input type="text" value="717059.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="53064.66"/>	<input type="text" value="549163.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="167896.30"/>	<input type="text" value="167896.30"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BILL PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	60750.00	186197.90
(ii) Unitemized	0.00	350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	60750.00	186547.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	14750.00	296850.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	75500.00	483397.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	75500.00	486397.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	75500.00	486397.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	48064.66	275163.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48064.66	275163.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	221000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	5000.00	53000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	53064.66	549163.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53064.66	549163.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	75500.00	483397.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75500.00	483397.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48064.66	275163.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48064.66	275163.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial) A. Benjamin Bordelon		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2014
Mailing Address 3513 Highway 308		Transaction ID : SA11AI.7367
City Raceland	State LA	Zip Code 70394
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Bollinger Shipyard	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. David A Bornn		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2014
Mailing Address PO Box 1677		Transaction ID : SA11AI.7382
City St Thomas	State VI	Zip Code 00802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Bornn Firm	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mark Bourgeois		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2014
Mailing Address 11 Waco Ave		Transaction ID : SA11AI.7361
City Houma	State LA	Zip Code 70360
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer LeBeuf Bros Towing	Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial) A. Bindy Bucci		Date of Receipt M M / D D / Y Y Y Y Y 12 / 11 / 2014
Mailing Address 2500 Country Club Drive		Transaction ID : SA11AI.7399
City Pittsburgh	State PA	Zip Code 15205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Golden Triangle Construction	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ben R. Butler		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2014
Mailing Address 509 7th Street 5th Floor		Transaction ID : SA11AI.7404
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Public Properties, LLC	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Filippo Cassinelli		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2014
Mailing Address PO Box 6280		Transaction ID : SA11AI.7349
City St Thomas	State VI	Zip Code 00801
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Isidro Paiewonsky Associates I	Occupation Business Owner/Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Sebastiano Cassinelli
 Full Name (Last, First, Middle Initial)
 Mailing Address 7-V Waterpoint Estates
 City St Thomas State VI Zip Code 00802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Isidor Paiewonsky Associates I Occupation Business Owner
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.7341
 Amount of Each Receipt this Period
5000.00

B. Myles Cheramie
 Full Name (Last, First, Middle Initial)
 Mailing Address 143 Chateau Drive
 City Lockport State LA Zip Code 70374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L&M Botrue Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.7357
 Amount of Each Receipt this Period
2500.00

C. Peter B Corr
 Full Name (Last, First, Middle Initial)
 Mailing Address 6501 Red Hook Plaza Ste 201
 City St Thomas State VI Zip Code 00802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Celtic Therapeutics Occupation Partner
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.7351
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial) A. Todd Danos		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 16116 W Main Street		Transaction ID : SA11AI.7365
City Cut Off	State LA	Zip Code 70345
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer JNB Operating	Occupation Operating Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Prakash Daswani		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address PO Box 1386		Transaction ID : SA11AI.7363
City St Thomas	State VI	Zip Code 00804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Lucky Jewelers	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Thomas Dooney		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 305 Millbank Rd		Transaction ID : SA11AI.7355
City Bryn Mawr	State PA	Zip Code 19010
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Bostonia	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Stephen Evans-Freke
 Full Name (Last, First, Middle Initial)
 Mailing Address 6501 Red Hook Plaza Ste 201
 City Saint Thomas State VI Zip Code 00802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Auven Therapeutics Occupation Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.7378
 Amount of Each Receipt this Period
 2500.00

B. Jack M. Fields Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Deer Ridge Estates Blvd
 City Kingwood State TX Zip Code 77339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Group Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.7330
 Amount of Each Receipt this Period
 2500.00

C. Matthew Hagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5328 Yacht Haven Grande Unit #15
 City St Thomas State VI Zip Code 00802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lexington Management LLC Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11AI.7387
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Susan Heck
Full Name (Last, First, Middle Initial)

Mailing Address 3529 Malvern Ct

City Alexandria State VA Zip Code 22304

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

Name of Employer Akin Gump Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : SA11AI.7384

Amount of Each Receipt this Period
 250.00

B. Cory Kief
Full Name (Last, First, Middle Initial)

Mailing Address 721 Rosedown Drive

City Thibodaux State LA Zip Code 70301

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

Name of Employer Offshore Towing Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : SA11AI.7359

Amount of Each Receipt this Period
 1000.00

C. Randolph Knight
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8209

City St Thomas State VI Zip Code 00801

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

Name of Employer RHK Consulting LLC Occupation Media Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : SA11AI.7395

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial) A. Steve Lammens		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 4028 Annas Retreat		Transaction ID : SA11AI.7345
City St Tomas	State VI	Zip Code 00802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Custom Builders	Occupation Civil Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Jeff Loveng		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
Mailing Address 400 N. Capitol Street, NW Ste. 585		Transaction ID : SA11AI.7403
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00	
Name of Employer Vandor Strategies, LLC	Occupation Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. William Perkins III		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014
Mailing Address 6010 Estate Nazareth #10		Transaction ID : SA11AI.7380
City St Thomas	State VI	Zip Code 00802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Small Ventures USA	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial) A. Marjorie Roberts		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
Mailing Address PO Box 6342		Transaction ID : SA11AI.7391
City St Thomas	State VI	Zip Code 00804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Russ Settoon		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 1073 Highway 70		Transaction ID : SA11AI.7369
City Pierre Part	State LA	Zip Code 70339
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Settoon Towing	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Andrew Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 6501 Red Hook Plaza Ste 201		Transaction ID : SA11AI.7347
City St Thomas	State VI	Zip Code 00802
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Island Roads Corporation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Kiril Sokoloff
Full Name (Last, First, Middle Initial)

Mailing Address Box 6191

City Ketchum State ID Zip Code 83340

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

Name of Employer 13D Research Occupation Publisher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : SA11AI.7389

Amount of Each Receipt this Period
 2000.00

B. David Urban
Full Name (Last, First, Middle Initial)

Mailing Address 42 Chestnut Street

City Wellesley State MA Zip Code 02481

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

Name of Employer ACG Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : SA11AI.7401

Amount of Each Receipt this Period
 1000.00

C. John R. Wessel
Full Name (Last, First, Middle Initial)

Mailing Address 72 Estates River #2

City Kingshill State VI Zip Code 00850

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

Name of Employer GEC LLC Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : SA11AI.7343

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)
A. Cornel Williams

Mailing Address PO Box 5814

City State Zip Code
Charlotte Amalie VI 00803

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

Name of Employer Occupation
Int'l Capital & Management Co President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : SA11AI.7353

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Bradley Wilson

Mailing Address 6005 Estate Nazareth

City State Zip Code
St Thomas VI 00802

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

Name of Employer Occupation
Self Employed Entrepreneur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SA11AI.7393

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	60750.00

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

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

FOR LINE NUMBER: PAGE 16 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Full Name (Last, First, Middle Initial)
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (AKA AGSH&F CIVIC ACTION COMMITTEE)

Mailing Address 1333 NEW HAMPSHIRE AVE., NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11C.7371

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
CONSUMER ELECTRONICS ASSOCIATION PAC

Mailing Address 1919 SOUTH EADS STREET

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11C.7374

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
DIAGEO NORTH AMERICA, INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE

City NORWALK State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11C.7376

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BILL PAC

A. Full Name (Last, First, Middle Initial)
DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE

Mailing Address 1250 EYE ST., NW #400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00030734

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : SA11C.7333

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : SA11C.7339

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
GULF STATES TOYOTA INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1375 ENCLAVE PARKWAY

City HOUSTON State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C** C00349373

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : SA11C.7331

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BILL PAC

A. HERZOG CONTRACTING CORP. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 330 ENCINITAS BLVD., STE. 101
 City ENCINITAS State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C** C00391979
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11C.7337
 Amount of Each Receipt this Period
 2500.00

B. WINSTON & STRAWN LLP POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 K ST NW
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00282921
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11C.7335
 Amount of Each Receipt this Period
 2500.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	14750.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Credit Card Payment--See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2014			

Transaction ID : SB21B.7408

Amount of Each Disbursement this Period

16173.24

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2014			

Transaction ID : SB21B.7408.0

Amount of Each Disbursement this Period

1655.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Chez Gourmet Catering

Mailing Address 1716 Corporate Drive

City Boynton Beach State FL Zip Code 33426

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2014			

Transaction ID : SB21B.7408.1

Amount of Each Disbursement this Period

5172.80

[MEMO ITEM]

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

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

16173.24

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. Crane's Beach House

Mailing Address 82 Gleason Street

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2014

Transaction ID : **SB21B.7408.2**

Amount of Each Disbursement this Period

1670.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Enterprise Rent a Car

Mailing Address 600 Corporate Park Dr.

City St Louis State MO Zip Code 63105

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2014

Transaction ID : **SB21B.7408.3**

Amount of Each Disbursement this Period

556.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Federal City Caterers

Mailing Address 1119 12th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2014

Transaction ID : **SB21B.7408.4**

Amount of Each Disbursement this Period

1650.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. Hilton Orlando

Mailing Address 6001 Destination Parkway

City Orlando State FL Zip Code 32819

Purpose of Disbursement
Travel/Event Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2014

Transaction ID : SB21B.7408.6

Amount of Each Disbursement this Period

1363.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Post Card Inn

Mailing Address 6300 Gulf Blvd

City St. Pete Beach State FL Zip Code 33706

Purpose of Disbursement
Travel/Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2014

Transaction ID : SB21B.7408.7

Amount of Each Disbursement this Period

1455.84

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Prime Rib

Mailing Address 2020 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2014

Transaction ID : SB21B.7408.8

Amount of Each Disbursement this Period

650.45

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. University Club of Milwaukee

Mailing Address 924 E Wells St.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : SB21B.7408.9

Amount of Each Disbursement this Period

718.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : SB21B.7408.10

Amount of Each Disbursement this Period

602.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 1909 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B.7407

Amount of Each Disbursement this Period

46.90

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

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

46.90

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. Eric Burgeson

Mailing Address 2403 N Utah Street

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Reimbursement-See Memo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : **SB21B.7416**

Amount of Each Disbursement this Period

4641.60

Full Name (Last, First, Middle Initial)

B. Old Stone Farmhouse

Mailing Address A1A Lovenland Estate

City St Thomas State VI Zip Code 00802

Purpose of Disbursement
Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : **SB21B.7416.0**

Amount of Each Disbursement this Period

4641.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Casey Contres

Mailing Address 1622 HG Street SE Unit A

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement-See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : **SB21B.7409**

Amount of Each Disbursement this Period

882.52

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

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

5524.12

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2014			

Transaction ID : **SB21B.7409.0**

Amount of Each Disbursement this Period

552.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Enterprise Rent a Car

Mailing Address 600 Corporate Park Dr.

City St Louis State MO Zip Code 63105

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2014			

Transaction ID : **SB21B.7409.1**

Amount of Each Disbursement this Period

202.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Epiphany Productions, Inc.

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Fundraising Consulting/Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2014			

Transaction ID : **SB21B.7415**

Amount of Each Disbursement this Period

5540.52

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

5540.52

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. Huckaby Davis Lisker

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : SB21B.7423

Amount of Each Disbursement this Period

4086.26

Full Name (Last, First, Middle Initial)

B. The Seagate Hotel & Spa

Mailing Address 1000 E Atlantic Blvd

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Travel/Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B.7422

Amount of Each Disbursement this Period

16654.67

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

20740.93

48025.71

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BILL PAC

Full Name (Last, First, Middle Initial)

A. Friends and Neighbors of Bruce Erb

Mailing Address PO Box 126

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB29.7420

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

5000.00

5000.00
