

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 NEW PAC

ADDRESS (number and street) P.O. BOX 7480 VISALIA CA 93290 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00398750 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Nunes, Toni, Dian, , Type or Print Name of Treasurer

Signature of Treasurer Nunes, Toni, Dian, , [Electronically Filed] Date 01 / 17 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**NEW 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="2016"/>	<input type="text" value="233702.81"/>	<input type="text" value="233702.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="226896.09"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="36497.50"/>	<input type="text" value="415118.93"/>
(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="263393.59"/>	<input type="text" value="648821.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10290.19"/>	<input type="text" value="395718.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="253103.40"/>	<input type="text" value="253103.40"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

**NEW 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).....	3000.00	46700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3000.00	46700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	26000.00	347064.21
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	29000.00	393764.21
12. Transfers From Affiliated/Other Party Committees.....	7497.50	18554.72
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	300.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
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)).....▶	36497.50	415118.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	36497.50	415118.93

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10290.19	219218.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10290.19	219218.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	156500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	20000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	10290.19	395718.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10290.19	395718.34

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	29000.00	393764.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29000.00	393764.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10290.19	219218.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	300.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10290.19	218918.34

**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 18
	(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)  
**NEW PAC**

**A. SYCUAN BAND OF THE KUMEYAAAY NATION**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5459 DEHESA ROAD  
 City EL CAJON State CA Zip Code 92019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 21 / 2016  
**Transaction ID : SA11AI.10153**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 DATED: 8/12/16 REC'VD: 12/21/16

**B. THOMPSON, STEPHEN M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 586  
 City ARLINGTON State VA Zip Code 22216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 JEFFERSON WATERMAN INTERNATION SENIOR VICE PRESIDENT  
 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 / 06 / 2016  
**Transaction ID : SA11AI.10127**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	3000.00

**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 7 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**NEW PAC**

**A. AMERICAN HOSPITAL ASSOCIATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 325 Seventh Street, NW  
Suite 700  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 06 / 2016**  
**Transaction ID : SA11C.10119**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1101 WILSON BLVD.  
City ARLINGTON State VA Zip Code 22209  
FEC ID number of contributing federal political committee. **C** C00281212  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 15 / 2016**  
**Transaction ID : SA11C.10154**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. DELOITTE POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 365  
City WASHINGTON State DC Zip Code 20044  
FEC ID number of contributing federal political committee. **C** C00211318  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 29 / 2016**  
**Transaction ID : SA11C.10114**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**NEW PAC**

**A. EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 PROFESSIONAL DRIVE  
 SUITE 400  
 City GAITHERSBURG State MD Zip Code 20879  
 FEC ID number of contributing federal political committee. **C** C00380303  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 14 / 2016  
**Transaction ID : SA11C.10115**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 DATED: 11/21/16 REC'VD: 12/14/16

**B. FREE SYRIA PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 75357  
 City WASHINGTON State DC Zip Code 20013  
 FEC ID number of contributing federal political committee. **C** C00621086  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 06 / 2016  
**Transaction ID : SA11C.10120**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. HEARPAC OF HEARING INDUSTRIES ASSOCIATION**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1444 I ST., NW, SUITE 700  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00437798  
 Name of Employer (for Individual) Occupation (for Individual)  
 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 / 14 / 2016  
**Transaction ID : SA11C.10122**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 DATED: 11/17/16 REC'VD: 12/14/16

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**NEW PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **1295 STATE STREET**

City <b>SPRINGFIELD</b>	State <b>MA</b>	Zip Code <b>01111</b>
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FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**12 / 14 / 2016**

**Transaction ID : SA11C.10124**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
DATED: 10/18/16 REC'VD: 12/14/16

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**PINNACLE WEST CAPITAL CORPORATION PAC**

Mailing Address **801 PENNSYLVANIA AVE NW  
SUITE 214**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**12 / 01 / 2016**

**Transaction ID : SA11C.10128**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**THE COMMITTEE FOR THE PRESERVATION OF CAPITALISM**

Mailing Address **PO BOX 65314**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20035</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00328468**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 14 / 2016**

**Transaction ID : SA11C.10117**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
DATED: 11/17/16 REC'VD: 12/14/16

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8500.00</b>
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WESTERN GROWERS POLITICAL ACTION COMMITTEE</b>		Date of Receipt
Mailing Address 15525 SAND CANYON		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City IRVINE	State CA	Zip Code 92618
FEC ID number of contributing federal political committee. <b>C</b> C00193979		<b>Transaction ID : SA11C.10125</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="26000.00"/>

**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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**NEW PAC**

**A. HOLD THE MAJORITY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 97275

City RALEIGH	State NC	Zip Code 27624
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00625475

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15209.75

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2016  
**Transaction ID : SA12.10130**

Amount of Each Receipt this Period  
7497.50

Memo Item  
DATED: 11/28/16 REC'VD: 12/1/16

**B. BRIGER, PETER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 25 FIELD POINT CIR

City GREENWICH	State CT	Zip Code 68300
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
HYDROMINE, INC PROJECT DEVELOPER

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 / 01 / 2016  
**Transaction ID : SA12.10130.0**

Amount of Each Receipt this Period  
2500.00

Memo Item  
JFC CONTRIBUTION

**C. LOUIS, ELIZABETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5 DONLTONS

City LONDON	State ZZ	Zip Code 00000
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
HOMEMAKER HOMEMAKER

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 / 01 / 2016  
**Transaction ID : SA12.10130.1**

Amount of Each Receipt this Period  
750.00

Memo Item  
JFC CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7497.50
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**NEW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ELLER, DIRK G, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2016
Mailing Address 8 PALACE COURT		<b>Transaction ID : SA12.10130.2</b>
City LONDON	State ZZ	Zip Code 00000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer (for Individual) TPG CAPITAL	Occupation (for Individual) PRIVITE EQUITY	<input checked="" type="checkbox"/> Memo Item JFC CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LANE, NATHAN, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2016
Mailing Address 78 COMPDEN HILL ROAD		<b>Transaction ID : SA12.10130.3</b>
City LONDON	State ZZ	Zip Code 00000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 687.50
Name of Employer (for Individual) BLUE MOUNTAIN CAPITAL MGMT	Occupation (for Individual) FINANCIAL ANALYST	<input checked="" type="checkbox"/> Memo Item JFC CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 687.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. LANE, MEGHANA, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2016
Mailing Address 78 COMPTON HILL ROAD		<b>Transaction ID : SA12.10130.4</b>
City LONDON	State ZZ	Zip Code 00000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 687.50
Name of Employer (for Individual) LANCASTER INVESTMENT MGMT	Occupation (for Individual) FINANCIAL ANALYST	<input checked="" type="checkbox"/> Memo Item JFC CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 687.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**NEW PAC**

**A. HEYE, ALLAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 GRANDISM ROAD  
 City LONDON State ZZ Zip Code 00000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Q STREET CAPITAL Occupation (for Individual) PARTNER  
 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 / 01 / 2016  
**Transaction ID : SA12.10130.5**  
 Amount of Each Receipt this Period  
 750.00  
 Memo Item  
**JFC CONTRIBUTION**

**B. BRICKEN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 HALFORD ROAD  
 City LONDON State ZZ Zip Code 00000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WELLS FARGO SECURITIES Occupation (for Individual) INVENTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 687.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : SA12.10130.6**  
 Amount of Each Receipt this Period  
 687.50  
 Memo Item  
**JFC CONTRIBUTION**

**C. BRICKEN, KATHRYN S, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 HALFORD STREET  
 City LONDON State ZZ Zip Code 00000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 687.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2016  
**Transaction ID : SA12.10130.7**  
 Amount of Each Receipt this Period  
 687.50  
 Memo Item  
**JFC CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**NEW PAC**

**A. LOBKOWICZ, PHILLIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 EAST 56TH STREET  
 City NEW YORK State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BBAM LLC Occupation (for Individual) BANKER  
 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 / 01 / 2016  
**Transaction ID : SA12.10130.8**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**JFC CONTRIBUTION**

**B. BLOOM, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 VESEY STREET  
 City NEW YORK State NY Zip Code 10281  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JONES DAY Occupation (for Individual) ATTORNEY  
 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 / 01 / 2016  
**Transaction ID : SA12.10130.9**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**JFC CONTRIBUTION**

**C. DIAMANDAKIS, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38 GRAHAM TERRACE  
 City LONDON State ZZ Zip Code 00000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITIBANK Occupation (for Individual) FINANCIAL ADVISOR  
 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 / 01 / 2016  
**Transaction ID : SA12.10130.10**  
 Amount of Each Receipt this Period 750.00  
 Memo Item  
**JFC CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	7497.50

**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"/> 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)  
**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. CARDMEMBER SERVICES - CREDIT CARD**

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement  
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.10155**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.10155**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SE GROUP SALES (SMITHSONIAN ENTERPRISES)**

Mailing Address P.O. BOX 418332

City BOSTON State MA Zip Code 02241

Purpose of Disbursement  
PAC FUNDRAISING EXP: CATERING/FOOD/BEV

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.10155**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**NEW PAC**

**A. KLWINES.COM**

Full Name (Last, First, Middle Initial)

Mailing Address 3005 EL CAMINO REAL

City REDWOOD CITY State CA Zip Code 94061

Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/BEV

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10155

Amount of Each Disbursement this Period: 1539.31

Memo Item

**B. CARDMEMBER SERVICES - CREDIT CARD**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement TRAVEL EXP: FUEL/PARKING/TAXI/MEALS/HOTEL - BALANCE UNDER REPORT LIMIT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10159

Amount of Each Disbursement this Period: 1052.16

Memo Item

**C. PALACE HOTEL**

Full Name (Last, First, Middle Initial)

Mailing Address 2 NEW MONTGOMERY ST

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement TRAVEL: HOTEL ACCOMMODATIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2016

FEC Identification Number: C

Transaction ID : SB21B.10155

Amount of Each Disbursement this Period: 587.19

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1052.16

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



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**NEW PAC**

Full Name (Last, First, Middle Initial)

**A. CARDMEMBER SERVICES - CREDIT CARD**

Mailing Address P.O. BOX 94014

City  
PALANTINE

State  
IL

Zip Code  
60094

Purpose of Disbursement  
OFFICE EXP: COMMUNICATIONS/BANK FEES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.10165**  
Amount of Each Disbursement this Period  
[REDACTED] 447.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T BILLING**

Mailing Address P.O. BOX 5014

City  
CAROL STREAM

State  
IL

Zip Code  
60197

Purpose of Disbursement  
OFFICE EXP: COMMUNICATIONS

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.10165**  
Amount of Each Disbursement this Period  
[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HENDERSON, CLARISSA N, , ,**

Mailing Address P.O. Box 7474

City  
VISALIA

State  
CA

Zip Code  
93291

Purpose of Disbursement  
PAC FUNDRAISING EXPENSE: CATERING/BEV

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.10168**  
Amount of Each Disbursement this Period  
[REDACTED] 865.79

Memo Item

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

[REDACTED] 1313.78

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

[REDACTED]

**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"/> 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)  
**NEW PAC**

Full Name (Last, First, Middle Initial) <b>A. COSTCO WHOLESALE</b>			Date of Disbursement MM / DD / YYYY 12 / 06 / 2016	
Mailing Address 3750 S MOONEY BLVD			FEC Identification Number C [ ]	
City VISALIA	State CA	Zip Code 93277	Transaction ID : <b>SB21B.10168</b>	
Purpose of Disbursement PAC FUNDRAISING EXP: CATERING/BEV		Category/ Type 003	Amount of Each Disbursement this Period 1224.00	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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		Category/ Type	Memo Item <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:				

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		Category/ Type	Memo Item <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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10290.19