



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MAKE AMERICA AWESOME**

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="1711.77"/>	<input type="text" value="1711.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1711.77"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8640.00"/>	<input type="text" value="8640.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="10351.77"/>	<input type="text" value="10351.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="299.77"/>	<input type="text" value="299.77"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10052.00"/>	<input type="text" value="10052.00"/>
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="5155.40"/>	

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

MAKE AMERICA AWESOME

Report Covering the Period: From: 01 / 01 / 2016 To: 01 / 31 / 2016

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).....	1750.00	1750.00
(ii) Unitemized .....	6890.00	6890.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8640.00	8640.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8640.00	8640.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8640.00	8640.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8640.00	8640.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	299.77	299.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	299.77	299.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	299.77	299.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	299.77	299.77

**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) .....	8640.00	8640.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8640.00	8640.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	299.77	299.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	299.77	299.77

**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 12  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**MAKE AMERICA AWESOME**

**A. Paul Bailey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 S 17th St  
 City Mattoon State IL Zip Code 61938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Preston Hunter Occupation IT Consulting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 31 / 2016  
**Transaction ID : SA11AI.4433**  
 Amount of Each Receipt this Period 250.00

**B. Allison Hayward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2215 Madison St  
 City Cambria State CA Zip Code 93428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 19 / 2016  
**Transaction ID : SA11AI.4336**  
 Amount of Each Receipt this Period 250.00

**C. Bryan McGrath**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27414 Ferry Bridge Rd  
 City Easton State MD Zip Code 21601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Ferry Bridge Group, LLC Occupation National Security Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2016  
**Transaction ID : SA11AI.4373**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 7 OF 12
	<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	

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)  
**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial) <b>A. James Nichols</b>		Date of Receipt
Mailing Address Info Req		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
City	State	Zip Code
Info Req	VA	11111
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4239</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Info Req	Info Req	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ann Sheffer</b>		Date of Receipt
Mailing Address 17 Stony Point Rd		<input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City	State	Zip Code
Westport	CT	06880
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4199</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Self	Philanthropist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Nathan Wurtzel</b>		Date of Receipt
Mailing Address 25452 Brickell Dr		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2016"/>
City	State	Zip Code
Chantilly	VA	20152
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4133</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
The Catalyst Group	Fundraiser	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="1750.00"/>

**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

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)  
**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address 2211 N First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
CC Processing

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  
01 / 31 / 2016

**Transaction ID : SB21B.4106**

Amount of Each Disbursement this Period

299.77

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 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 Y Y

Amount of Each Disbursement this Period

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

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

299.77

299.77

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**MAKE AMERICA AWESOME**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Liz Mair</b>	Nature of Debt (Purpose): Advance of Personal Funds (See December IE Memo Entry)
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 504.00	<b>Transaction ID : SD10.4479</b>	
Amount Incurred This Period 4217.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 4721.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Liz Mair</b>	Nature of Debt (Purpose): Advance of Personal Funds
Mailing Address 1200 Nash St Ste 247	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period 377.11	<b>Transaction ID : SD10.4116</b>	
Amount Incurred This Period 56.69	Payment This Period 0.00	Outstanding Balance at Close of This Period 433.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5155.40
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	5155.40
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	5155.40

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Alpha Media (Digity 3E)</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 341 S Yorktown Pike	Amount <span style="border: 1px solid black; padding: 2px;">864.00</span>
City Mason City      State IA      Zip Code 50401	<b>Transaction ID : SE.4471</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Purpose of Expenditure Advertising - Radio      Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span>	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>KBUR (Galesburg Broadcasting)</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Mailing Address 610 4th St Ste 300	Amount <span style="border: 1px solid black; padding: 2px;">227.96</span>
City Burlington      State IA      Zip Code 52601	<b>Transaction ID : SE.4473</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 25 / 2016
Purpose of Expenditure Advertising - Radio (Est \$268.20 on 1/26 24-Hr Report)      Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate DONALD J TRUMP <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span>	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Chris Marston*      **[Electronically Filed]**      Date M M / D D / Y Y Y Y Y Y  
02 / 20 / 2016

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>KCPS</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 25 / 2016
Mailing Address 205 S Gear Ave		Amount 157.80
City West Burlington	State IA	Zip Code 52655
Purpose of Expenditure Advertising - Radio	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 25 / 2016
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>KICD (Spencer Radio Group)</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 25 / 2016
Mailing Address PO Box 260		Amount 698.34
City Spencer	State IA	Zip Code 51301
Purpose of Expenditure Advertising - Radio (Est \$216, \$246 on 1/26 24-Hr Report)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 25 / 2016
Name of Federal Candidate DONALD J TRUMP	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Chris Marston*  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
02 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MAKE AMERICA AWESOME
FEC IDENTIFICATION NUMBER C C00594176
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee KMA (KMA Broadcasting) [MEMO ITEM]
Mailing Address 209 N Elm St
City State Zip Code Shenandoah IA 51601
Purpose of Expenditure Advertising - Radio
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 01 / 25 / 2016
Amount 1260.00
Transaction ID : SE.4472
Date of Disbursement or Obligation 01 / 25 / 2016
Office Sought: House District:
President Senate State: IA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee KOIL (NRG Media) [MEMO ITEM]
Mailing Address 5011 Capitol Ave
City State Zip Code Omaha NE 68132
Purpose of Expenditure Advertising - Radio (Est \$600 on 1/26 24-Hr Report)
Name of Federal Candidate DONALD J TRUMP
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 01 / 25 / 2016
Amount 510.00
Transaction ID : SE.4474
Date of Disbursement or Obligation 01 / 25 / 2016
Office Sought: House District:
President Senate State: IA
Disbursement For: Primary General 2016 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 0.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 0.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date 02 / 20 / 2016
Signature