

# 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.   
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

ADDRESS (number and street)   
Attn: Scott Smoes 56-3S  
 Check if different than previously reported. (ACC)  MI

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  07 / 01 / 2014 through  09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Scott E Smoes

Signature of Treasurer Scott E Smoes [Electronically Filed] Date  10 / 06 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

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="784.65"/>	<input type="text" value="784.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39803.67"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10583.49"/>	<input type="text" value="80452.51"/>
(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="50387.16"/>	<input type="text" value="81237.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="37000.00"/>	<input type="text" value="67850.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13387.16"/>	<input type="text" value="13387.16"/>
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

**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

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).....	10499.98	79951.06
(ii) Unitemized .....	83.51	501.45
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10583.49	80452.51
(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) .....	10583.49	80452.51
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))..... ▶	10583.49	80452.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10583.49	80452.51

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37000.00	67850.00
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)) ..	37000.00	67850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37000.00	67850.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	10583.49	80452.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10583.49	80452.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 29
	<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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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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Christine Abdo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7575 Fulton Street East  
 City State Zip Code  
 Ada MI 49355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Alticor Inc IT Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 384.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5772**  
 Amount of Each Receipt this Period  
 96.15

**B. David Baarman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6414 127th Ave  
 City State Zip Code  
 Fennville MI 49408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Alticor Inc. Manager - R & D  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1153.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5770**  
 Amount of Each Receipt this Period  
 288.45

**C. Jill Beckman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5698 Blakely Rd  
 City State Zip Code  
 Belmont MI 49306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Alticor Inc. VP Deputy General Counsel - Legal  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5764**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	434.60
<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 7 OF 29
	<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Dirk C. Bloemendaal**  
Full Name (Last, First, Middle Initial)

Mailing Address 7575 Fulton Street East

City Ada	State MI	Zip Code 49355
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alticor	Occupation Government Affairs
-----------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SA11AI.5756**

Amount of Each Receipt this Period  

100.00
--------

**B. Matthew Blok**  
Full Name (Last, First, Middle Initial)

Mailing Address 7760 Hunters Way Ct

City Ada	State MI	Zip Code 49301
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alticor Inc.	Occupation Director Functional FP&A
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SA11AI.5793**

Amount of Each Receipt this Period  

60.00
-------

**C. James Brundidge**  
Full Name (Last, First, Middle Initial)

Mailing Address 3462 Goodwood Dr SE

City Grand Rapids	State MI	Zip Code 49546
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FEC ID number of contributing federal political committee. **C**

Name of Employer Access Business Group LLC	Occupation Director Lakeview Ops
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **173.07**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SA11AI.5778**

Amount of Each Receipt this Period  

96.15
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>256.15</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 8 OF 29
<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. John Carrington**  
Full Name (Last, First, Middle Initial)

Mailing Address 8690 Cascade Rd

City Ada	State MI	Zip Code 49301
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alticor Inc.	Occupation Director - Global Sales
----------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **85.65**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5788**

Amount of Each Receipt this Period  
**85.65**

**B. Michael Cazer**  
Full Name (Last, First, Middle Initial)

Mailing Address 7575 Fulton Street East

City Ada	State MI	Zip Code 49355
-------------	-------------	-------------------

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

Name of Employer Alticor, Inc.	Occupation EVP-CFO
-----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2307.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5773**

Amount of Each Receipt this Period  
**576.90**

**C. Roger Colman**  
Full Name (Last, First, Middle Initial)

Mailing Address 571 Carnoustie SE

City Grand Rapids	State MI	Zip Code 49546
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alticor Inc	Occupation VP Corporate Development
---------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5787**

Amount of Each Receipt this Period  
**288.45**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>951.00</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 9 OF 29
	<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Laura Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 3010 Indian Lakes

City Cedar Springs State MI Zip Code 49319

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

Name of Employer Alticor Inc. Occupation Director - Talent Acq & Engagement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.5769**

Amount of Each Receipt this Period  
**96.15**

**B. Kim Drabik**  
Full Name (Last, First, Middle Initial)

Mailing Address 2780 Sturbridge Drive

City Ada State MI Zip Code 49301

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

Name of Employer Amway International Inc. Occupation Manager - Shareholder Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **86.55**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.5779**

Amount of Each Receipt this Period  
**86.55**

**C. Bob Elliott**  
Full Name (Last, First, Middle Initial)

Mailing Address 5314 Stuart

City Kentwood State MI Zip Code 49508

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

Name of Employer Alticor Inc. Occupation Manager - Desktop Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **57.69**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.5781**

Amount of Each Receipt this Period  
**57.69**

**SUBTOTAL** of Receipts This Page (optional)..... **240.39**

**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 10 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Robert W. Hamilton**

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

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

Name of Employer Occupation  
Alticor Industry Relations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
384.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5755**

Amount of Each Receipt this Period  
96.15

Full Name (Last, First, Middle Initial)  
**B. Stephen Hanenberg**

Mailing Address 2515 Mason Ridge Ct

City State Zip Code  
Grand Rapids MI 49525

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

Name of Employer Occupation  
Amway Global Services VP - Asia Pacific Human Resources

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
173.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5789**

Amount of Each Receipt this Period  
173.07

Full Name (Last, First, Middle Initial)  
**C. Brandi Huyser**

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

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

Name of Employer Occupation  
Amway International Inc. Manager Business Opportunity Developmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.5797**

Amount of Each Receipt this Period  
28.83

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 298.05

**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 11 OF 29  
(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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Edward Johnson**

Mailing Address 7636 Gooseberry Drive

City State Zip Code  
Caledonia MI 49316

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

Name of Employer Occupation  
Access Business Group Manager Supply Chain Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57.69

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.5795**

Amount of Each Receipt this Period  
57.69

Full Name (Last, First, Middle Initial)  
**B. Cary Justice**

Mailing Address 2328 Gatetree Lane SE

City State Zip Code  
Grand Rapids MI 49546

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

Name of Employer Occupation  
Alticor, Inc Corporate Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.5761**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Kurt Ludlow**

Mailing Address 4957 Glen Oaks Drive

City State Zip Code  
Rockford MI 49341

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

Name of Employer Occupation  
Alticor Inc. VP - Global IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.5757**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 207.69

**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 29
<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Bruce Meyers</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11AI.5791</b>
Mailing Address 836 North State Road		Amount of Each Receipt this Period 57.69
City Belding State MI Zip Code 48809	FEC ID number of contributing federal political committee. C	
Name of Employer Access Business Group Occupation Group Leader	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 57.69

Full Name (Last, First, Middle Initial) <b>B. Mike Mohr</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11AI.5763</b>
Mailing Address 7629 Silverthorn Drive		Amount of Each Receipt this Period 200.00
City Ada State MI Zip Code 49301	FEC ID number of contributing federal political committee. C	
Name of Employer Alticor Inc Occupation VP, General Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00

Full Name (Last, First, Middle Initial) <b>C. Angie Polsgrove</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11AI.5768</b>
Mailing Address 10986 Woodbushe		Amount of Each Receipt this Period 96.15
City Lowell State MI Zip Code 49331	FEC ID number of contributing federal political committee. C	
Name of Employer Alticor Inc Occupation Director - National Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	353.84
<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 29
	<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Rainey Repins**

Mailing Address 10916 Whispering Valley Lane

City Middleville	State MI	Zip Code 49333
---------------------	-------------	-------------------

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

Name of Employer Alticor Inc.	Occupation Director - Legal
----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57.69

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5783**

Amount of Each Receipt this Period  
57.69

Full Name (Last, First, Middle Initial)  
**B. Brian Riefe-Peters**

Mailing Address 7575 Fulton Street East

City Ada	State MI	Zip Code 49355
-------------	-------------	-------------------

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

Name of Employer Alticor Inc.	Occupation Manager Enterprise Benefits
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
86.55

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5799**

Amount of Each Receipt this Period  
86.55

Full Name (Last, First, Middle Initial)  
**C. Kelly Savage**

Mailing Address 615 Jackson Street

City Grandville	State MI	Zip Code 49418
--------------------	-------------	-------------------

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

Name of Employer Alticor	Occupation Chief HR Officer
-----------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3461.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5775**

Amount of Each Receipt this Period  
961.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1105.74
<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 29
	<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

**A. Greg Schroeder**  
Full Name (Last, First, Middle Initial)

Mailing Address 1432 Patterson Ave SE

City	State	Zip Code
Grand Rapids	MI	49546

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

Name of Employer	Occupation
Alticor Inc.	Director - Global Trade

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.60**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5765**

Amount of Each Receipt this Period  

<b>76.90</b>
--------------

**B. Jon Sherk**  
Full Name (Last, First, Middle Initial)

Mailing Address 6269 Clubview Court

City	State	Zip Code
Ada	MI	49301

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

Name of Employer	Occupation
Alticor Inc.	Director & AGC/CLO North America

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5767**

Amount of Each Receipt this Period  

<b>96.15</b>
--------------

**C. James E. Siewertsen**  
Full Name (Last, First, Middle Initial)

Mailing Address 1738 Secretariat Drive SE

City	State	Zip Code
Grand Rapids	MI	49546

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

Name of Employer	Occupation
Alticor	VP - Global Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.5754**

Amount of Each Receipt this Period  

<b>96.15</b>
--------------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>269.20</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 15 OF 29
	<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Alan Simpson**

Mailing Address 462 Enclave Ct SE

City Grand Rapids State MI Zip Code 49546

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

Name of Employer Alticor Occupation Director - Op Ex

Access Business Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.5774**

Amount of Each Receipt this Period  
**96.15**

Full Name (Last, First, Middle Initial)  
**B. Lisa Smith**

Mailing Address 3454 Misty Lane Ct

City Grand Rapids State MI Zip Code 49546

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

Name of Employer Alticor Occupation Director & Mgr Cnsl Brand

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.5776**

Amount of Each Receipt this Period  
**192.30**

Full Name (Last, First, Middle Initial)  
**C. Scott E Smoes**

Mailing Address 7575 E Fulton 56 - 3S

City Ada State MI Zip Code 49355

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

Name of Employer Alticor Occupation Financial Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **96.83**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.5758**

Amount of Each Receipt this Period  
**96.83**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **385.28**

**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 16 OF 29
<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial) <b>A. Monica Stitt</b>			Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11AI.5771</b>
Mailing Address 7575 Fulton Street			Amount of Each Receipt this Period 96.15
City Ada	State MI	Zip Code 49355	
FEC ID number of contributing federal political committee. C			
Name of Employer Amway North America	Occupation Director - Customer Support		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60		

Full Name (Last, First, Middle Initial) <b>B. Mitchell Urbytes</b>			Date of Receipt MM / DD / YYYY 09 / 30 / 2014 <b>Transaction ID : SA11AI.5762</b>
Mailing Address 1378 Spinnaker Court			Amount of Each Receipt this Period 375.00
City Holland	State MI	Zip Code 49424	
FEC ID number of contributing federal political committee. C			
Name of Employer Alticor Inc.	Occupation Mgr, Durables Strategic Business Line		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1390.00		

Full Name (Last, First, Middle Initial) <b>C. Stephen A. Van Andel</b>			Date of Receipt MM / DD / YYYY 07 / 01 / 2014 <b>Transaction ID : SA11AI.5752</b>
Mailing Address 7575 Fulton Street East			Amount of Each Receipt this Period 5000.00
City Ada	State MI	Zip Code 49355	
FEC ID number of contributing federal political committee. C			
Name of Employer Alticor	Occupation Board Member		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5471.15
<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 17 OF 29
<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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Michael VanderMey**

Mailing Address 7122 Peddler Lake Road

City State Zip Code  
Clarksville MI 48815

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

Name of Employer Occupation  
Alticor Inc. Manager - Engineering

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57.69

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014  
**Transaction ID : SA11AI.5785**

Amount of Each Receipt this Period  
57.69

Full Name (Last, First, Middle Initial)  
**B. Carl Wiegand**

Mailing Address 4505 Summit Forest Drive

City State Zip Code  
Rockford MI 49341

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

Name of Employer Occupation  
Alticor Inc. Director - Database & IT Svc Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
384.60

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014  
**Transaction ID : SA11AI.5766**

Amount of Each Receipt this Period  
96.15

Full Name (Last, First, Middle Initial)  
**C. Blake Wyant**

Mailing Address 9191 Enhancement Drive SE

City State Zip Code  
Alto MI 49302

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

Name of Employer Occupation  
Access Business Group LLC Sr Process Improv Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
124.93

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014  
**Transaction ID : SA11AI.5777**

Amount of Each Receipt this Period  
48.05

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.89

**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 29
	(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)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)  
**A. Michael J. Zarrelli**

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

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

Name of Employer Occupation  
Alticor Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SA11AI.5760**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. Joseph Zeigler**

Mailing Address 7575 East Fulton Street

City State Zip Code  
Ada MI 49355

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

Name of Employer Occupation  
Alticor Inc. Director - Quality Assurance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SA11AI.5753**

Amount of Each Receipt this Period  
125.00

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  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10499.98

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. MIKE BISHOP FOR CONGRESS**

Mailing Address P.O. BOX 1148

City BRINGTON State MI Zip Code 48116

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MI District: 08

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	4

Transaction ID : **SB23.5683**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. CARLOS CARLOS CURBELO CONGRESS**

Mailing Address 8770 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : **SB23.5703**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. SUSAN COLLINS**

Mailing Address 223 NOWELL ROAD

City BANGOR State ME Zip Code 04401

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: ME District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : **SB23.5695**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. BARBARA COMSTOCK FOR CONGRESS**

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : **SB23.5697**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. JOE CONGRESSMAN JOE BARTON CMTE**

Mailing Address P.O. BOX 1444

City ENNIS State TX Zip Code 75120

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: TX District: 06

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : **SB23.5734**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. ANDER CRENSHAW FOR CONGRESS CAMPAIGN**

Mailing Address 7235 BONNEVAL ROAD  
SUITE 210

City JACKSONVILLE State FL Zip Code 32256

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 04

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : **SB23.5701**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. ELISE ELISE FOR CONGRESS**

Mailing Address PO BOX 338

City State Zip Code  
WILLSBORO NY 12996

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 05 / 2014

Transaction ID : SB23.5727

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DAVID FRIENDS OF DAVID JOLLY**

Mailing Address P. O. BOX 1158

City State Zip Code  
INDIAN ROCKS BEACH FL 33785

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 05 / 2014

Transaction ID : SB23.5717

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRANK FRIENDS OF FRANK GUINTA**

Mailing Address PO BOX 877

City State Zip Code  
MANCHESTER NH 03105

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NH District: 01

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 05 / 2014

Transaction ID : SB23.5705

Amount of Each Disbursement this Period

2000.00

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

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

4000.00

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. NAN FRIENDS OF NAN HAYWORTH**

Mailing Address P.O. BOX 394

City FISHKILL State NY Zip Code 12524

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NY District: 18

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : **SB23.5707**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. RICHARD HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NC District: 08

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : **SB23.5709**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. JAIME JAIME FOR CONGRESS**

Mailing Address PO BOX 1614

City RIDGEFIELD State WA Zip Code 98642

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WA District: 03

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **SB23.5736**

Amount of Each Disbursement this Period

1000.00

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

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

4000.00

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. EVAN JENKINS FOR CONGRESS**

Mailing Address PO BOX 727

City HUNTINGTON State WV Zip Code 25711

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WV District: 03

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB23.5711

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. BILL JOHNSON FOR CONGRESS**

Mailing Address PO BOX 14496

City POLAND State OH Zip Code 44514

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: OH District: 06

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB23.5713

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. KRISTI KRISTI FOR CONGRESS**

Mailing Address PO BOX 852

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: SD District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

Transaction ID : SB23.5723

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. LOU LOU BARLETTA FOR CONGRESS**

Mailing Address P.O. BOX 128

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 11

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : SB23.5691

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. MITCH MCCONNELL VICTORY KENTUCKY**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: KY District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.5742

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. MARTHA MCSALLY FOR CONGRESS**

Mailing Address PO BOX 19128

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 02

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : SB23.5719

Amount of Each Disbursement this Period

1000.00

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

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

5000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. ALEX MOONEY FOR CONGRESS**

Mailing Address P.O. BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MD District: 02

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : SB23.5721

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. SCOTT NEW HAMPSHIRE FOR SCOTT BROWN**

Mailing Address 379 ELM STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NH District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : SB23.5693

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. PAT PAT ROBERTS FOR US SENATE INC**

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: KS District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	4

Transaction ID : SB23.5687

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

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

4	0	0	0	0	0	0	0	0	0

4	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. MIKE POMPEO FOR CONGRESS INC**

Mailing Address PO BOX 780146

City WICHITA State KS Zip Code 67212

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: KS District: 04

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	01	/	2014

**Transaction ID : SB23.5685**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. RODNEY RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB23.5738**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. RYAN RYAN COSTELLO FOR CONGRESS**

Mailing Address PO BOX 3154

City WEST CHESTER State PA Zip Code 19381

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	05	/	2014

**Transaction ID : SB23.5699**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. STEVE SOUTHERLAND FOR CONGRESS**

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : SB23.5725

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. STEVE STIVERS FOR CONGRESS**

Mailing Address 4679 WINTERSET DRIVE

City COLUMBUS State OH Zip Code 43220

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: OH District: 15

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2014

Transaction ID : SB23.5729

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TONY STRICKLAND FOR CONGRESS**

Mailing Address PO BOX 630446

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District: 25

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.5748

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. TED TED LIEU FOR CONGRESS**

Mailing Address 6380 WILSHIRE BLVD #1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District: 33

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.5740

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. TOM TOM MACARTHUR FOR CONGRESS**

Mailing Address PO BOX 225

City COLONIA State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NJ District: 03

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.5744

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TOM TOM REED FOR CONGRESS**

Mailing Address PO BOX 391

City GENEVA State NY Zip Code 14456

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NY District: 23

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB23.5746

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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NAME OF COMMITTEE (In Full)  
**ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC**

Full Name (Last, First, Middle Initial)

**A. DAVID YOUNG FOR IOWA INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2014

Mailing Address PO BOX 162

**Transaction ID : SB23.5732**

City State Zip Code  
VAN METER IA 50261

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IA District: 03

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

Amount of Each Disbursement this Period

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City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

1000.00
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**TOTAL** This Period (last page this line number only)..... ▶

37000.00
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