

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.
THOROUGHbred PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

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 / / through / /

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 Patricia Doty Bradshaw

Signature of Treasurer Patricia Doty Bradshaw [Electronically Filed] Date / /

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

THOROUGHbred 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="2015"/>		254161.63
(b) Cash on Hand at Beginning of Reporting Period.....	254161.63	
(c) Total Receipts (from Line 19)	23600.00	23600.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	277761.63	277761.63
7. Total Disbursements (from Line 31).....	109945.12	109945.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	167816.51	167816.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
THOROUGHBRED 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).....	3600.00	3600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3600.00	3600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23600.00	23600.00
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))..... ▶	23600.00	23600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23600.00	23600.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	20195.12	20195.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20195.12	20195.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	85750.00	85750.00
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	4000.00	4000.00
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)) ..	109945.12	109945.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109945.12	109945.12

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)	23600.00	23600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23600.00	23600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20195.12	20195.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20195.12	20195.12

**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 16
	<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	

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)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial) A. Peter Briger		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 Transaction ID : SA11AI.6021
Mailing Address 25 Field Point Circle		Amount of Each Receipt this Period 2600.00 contribution
City Greenwich	State CT	Zip Code 06830-7072
FEC ID number of contributing federal political committee. C		
Name of Employer Hydromine, Inc.	Occupation requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

Full Name (Last, First, Middle Initial) B. Joseph Stanko		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 27 / 2015 Transaction ID : SA11AI.6020
Mailing Address 2100 Whiteoaks Drive		Amount of Each Receipt this Period 1000.00 contribution
City Alexandria	State VA	Zip Code 22306
FEC ID number of contributing federal political committee. C		
Name of Employer Hunton & Williams	Occupation partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	3600.00

**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 16
<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)
THOROUGHbred PAC

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

Transaction ID : SA11C.6029

Amount of Each Receipt this Period
5000.00

contribution

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIAN PAC

Mailing Address 2831 Lone Oak Road

City State Zip Code
Paducah KY 42003

FEC ID number of contributing federal political committee. **C** C00351197

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2015

Transaction ID : SA11C.6026

Amount of Each Receipt this Period
5000.00

contribution

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City State Zip Code
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SA11C.6024

Amount of Each Receipt this Period
2500.00

contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<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)
THOROUGHbred PAC

A. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 E. Houston Street
 Room 7-A-50
 City San Antonio State TX Zip Code 78205
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer Occupation
 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
 05 / 21 / 2015
Transaction ID : SA11C.6028
 Amount of Each Receipt this Period
 2500.00
 contribution

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 G STREET NW
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00194746
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : SA11C.6027
 Amount of Each Receipt this Period
 2500.00
 contribution

C. VERIZON COMMUNICATIONS INC POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 I STREET NW SUITE 400 WEST
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00025163
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2015
Transaction ID : SA11C.6025
 Amount of Each Receipt this Period
 2500.00
 contribution

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	20000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. Patricia Doty Bradshaw

Mailing Address 61 Pinehurst Street

City Memphis State TN Zip Code 38117

Purpose of Disbursement
Bookkeeping and PAC maintenance

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.6032

Amount of Each Disbursement this Period

1464.36

Full Name (Last, First, Middle Initial)

B. Patricia Doty Bradshaw

Mailing Address 61 Pinehurst Street

City Memphis State TN Zip Code 38117

Purpose of Disbursement
Bookkeeping and PAC maintenance

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2015

Transaction ID : SB21B.6033

Amount of Each Disbursement this Period

2130.87

Full Name (Last, First, Middle Initial)

C. Platinum Plus for Business/Business Card

Mailing Address PO Box 15469

City Wilmington State DE Zip Code 19850

Purpose of Disbursement
credit card: see memo

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2015

Transaction ID : SB21B.6034

Amount of Each Disbursement this Period

10141.43

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

13736.66

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"/> 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)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. The Beverly Hills Hotel

Mailing Address Sunset Blvd

City State Zip Code
Beverly Hills CA 90210

Purpose of Disbursement
PAC fundraising event expense - venue

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : **SB21B.6034.0**

Amount of Each Disbursement this Period

10000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Platinum Plus for Business/Business Card

Mailing Address PO Box 15469

City State Zip Code
Wilmington DE 19850

Purpose of Disbursement
credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : **SB21B.6034.1**

Amount of Each Disbursement this Period

141.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. The Gula Graham Group

Mailing Address 700 12th Street, NW
Suite 700

City State Zip Code
Washington DC 20005

Purpose of Disbursement
fundraising consulting fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	06	/	2015

Transaction ID : **SB21B.6035**

Amount of Each Disbursement this Period

2673.86

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

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

2673.86

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial) A. The Gula Graham Group		Date of Disbursement MM / DD / YYYY 01 / 20 / 2015
Mailing Address 700 12th Street, NW Suite 700		Transaction ID : SB21B.6036
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement fundraising consulting fee and expenses	Amount of Each Disbursement this Period 65.83
Candidate Name	Category/Type 003	
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. The Gula Graham Group		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address 700 12th Street, NW Suite 700		Transaction ID : SB21B.6037
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement fundraising consulting fee	Amount of Each Disbursement this Period 2580.00
Candidate Name	Category/Type 003	
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) C. The Gula Graham Group		Date of Disbursement MM / DD / YYYY 04 / 23 / 2015
Mailing Address 700 12th Street, NW Suite 700		Transaction ID : SB21B.6038
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement fundraising consulting fee and expenses	Amount of Each Disbursement this Period 43.37
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2689.20
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"/> 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)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20035

Purpose of Disbursement PO Box renewal - 6 months

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 07 / 2015

Transaction ID : **SB21B.6039**

Amount of Each Disbursement this Period: 64.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address multiple locations

City State Zip Code

Purpose of Disbursement bank charge

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 09 / 2015

Transaction ID : **SB21B.6040**

Amount of Each Disbursement this Period: 34.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address multiple locations

City State Zip Code

Purpose of Disbursement bank charge

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
04 / 08 / 2015

Transaction ID : **SB21B.6041**

Amount of Each Disbursement this Period: 3.00

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... ▶ 101.00

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"/> 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)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. ED WHITFIELD

Mailing Address 108 ALUMNI AVENUE

City HOPKINSVILLE State KY Zip Code 42240

Purpose of Disbursement
PAC travel expense reimbursement

Candidate Name

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

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.6031

Amount of Each Disbursement this Period

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

/ /

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

/ /

Amount of Each Disbursement this Period

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 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)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. JUSTIN FAREED FOR CONGRESS

Mailing Address 2151 S COLLEGE DR STE 101

City State Zip Code
SANTA MARIA CA 93455

Purpose of Disbursement
campaign contribution

011

Candidate Name

JUSTIN FAREED

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB23.6043

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : SB23.6047

Amount of Each Disbursement this Period

40000.00

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SB23.6046

Amount of Each Disbursement this Period

35750.00

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

80750.00

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 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)
THOROUGHbred PAC

A. REPUBLICAN PARTY OF KENTUCKY

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1068

City FRANKFORT State KY Zip Code 40602

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 19 / 2015

Transaction ID : SB23.6044

Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

TOTAL This Period (last page this line number only)..... ▶ 85750.00

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

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NAME OF COMMITTEE (In Full)
THOROUGHbred PAC

Full Name (Last, First, Middle Initial)

A. Comer for Governor

Mailing Address PO Box 6873

City Frankfort State KY Zip Code 40602

Purpose of Disbursement
non-federal campaign contribution

011

Candidate Name

James Comer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.6055

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Morrisey for West Virginia

Mailing Address 43 Ruland Rd

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
non-federal campaign contribution

011

Candidate Name

Patrick Morrisey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.6053

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Republican Party of Kentucky (Non-federal)

Mailing Address PO Box 1068

City Frankfort State KY Zip Code 40602

Purpose of Disbursement
non-federal contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.6050

Amount of Each Disbursement this Period

2500.00

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

4000.00

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

4000.00