

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.
Concerned American Voters

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 Edward King

Signature of Treasurer Edward King [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

Concerned American Voters

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"/>	<input type="text" value="4279.19"/>	<input type="text" value="4279.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1599427.23"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3233179.27"/>	<input type="text" value="5113004.27"/>
(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="4832606.50"/>	<input type="text" value="5117283.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2336327.44"/>	<input type="text" value="2621004.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2496279.06"/>	<input type="text" value="2496279.06"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="711.84"/>	

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

Concerned American Voters

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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).....	1127.82	1127.82
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3232051.45	5111876.45
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))..... ▶	3233179.27	5113004.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3233179.27	5113004.27

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	7068.12	7068.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7068.12	7068.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1974662.86	2231305.78
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	354596.46	382630.50
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)) ..	2336327.44	2621004.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2336327.44	2621004.40

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	7068.12	7068.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1127.82	1127.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	5940.30	5940.30

**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 128
<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

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)
Concerned American Voters

A. Des Moines Water Works
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 George Flagg Pkwy
 City Des Moines State IA Zip Code 50321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 115.61

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA15.5902
 Amount of Each Receipt this Period
 115.61
 Vendor refund

B. First Financial Group L.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1987 Spruce Hills Dr
 City Bettendorf State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015
Transaction ID : SA15.5888
 Amount of Each Receipt this Period
 950.00
 Vendor refund

C. MidAmerican Energy
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8020
 City Davenport State IA Zip Code 52808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 62.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA15.5903
 Amount of Each Receipt this Period
 62.21
 Vendor refund

SUBTOTAL of Receipts This Page (optional).....▶	1127.82
TOTAL This Period (last page this line number only).....▶	1127.82

**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 128
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Winfred Adams
Full Name (Last, First, Middle Initial)
Mailing Address 2347 Forest Ave
City Durango State CO Zip Code 81301
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 100.00

Date of Receipt
10 / 16 / 2015
Transaction ID : SA17.5900
Amount of Each Receipt this Period 100.00
Carey account contribution

B. Winfred Adams
Full Name (Last, First, Middle Initial)
Mailing Address 2347 Forest Ave
City Durango State CO Zip Code 81301
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt
10 / 16 / 2015
Transaction ID : SA17.5901
Amount of Each Receipt this Period 100.00
Carey account contribution

C. AMERICA'S LIBERTY PAC
Full Name (Last, First, Middle Initial)
Mailing Address 332 W. LEE HIGHWAY SUITE 314
City WARRENTON State VA Zip Code 20186
FEC ID number of contributing federal political committee. **C** C00532572
Name of Employer Occupation
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
08 / 24 / 2015
Transaction ID : SA17.5886
Amount of Each Receipt this Period 50000.00
Carey account contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 50200.00
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 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. AMERICA'S LIBERTY PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 W. LEE HIGHWAY
 SUITE 314
 City WARRENTON State VA Zip Code 20186
 FEC ID number of contributing federal political committee. **C** C00532572
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2015
Transaction ID : SA17.5891
 Amount of Each Receipt this Period
 50000.00
 Carey account contribution

B. Martin Avila
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 F Street NW
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Terra Eclipse CEO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015
Transaction ID : SA17.5877
 Amount of Each Receipt this Period
 25.00
 Carey account contribution

C. Martin Avila
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 F Street NW
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Terra Eclipse CEO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 35.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2015
Transaction ID : SA17.5882
 Amount of Each Receipt this Period
 10.00
 Carey account contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 50035.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial)
A. Martin Avila

Mailing Address 600 F Street NW

City Washington State DC Zip Code 20004

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

Name of Employer Terra Eclipse Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA17.5919

Amount of Each Receipt this Period
25.00

Carey account contribution

Full Name (Last, First, Middle Initial)
B. Scott Banister

Mailing Address P.O. Box 997

City Half Moon Bay State CA Zip Code 94019

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

Name of Employer Self-Employed Occupation Angel Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1800000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2015

Transaction ID : SA17.5894

Amount of Each Receipt this Period
550000.00

Carey account contribution

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

Mailing Address P.O. Box 997

City Half Moon Bay State CA Zip Code 94019

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

Name of Employer Self-Employed Occupation Angel Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : SA17.5927

Amount of Each Receipt this Period
200000.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	750025.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Andrew Beal
Full Name (Last, First, Middle Initial)

Mailing Address 6000 Legacy Dr

City Plano State TX Zip Code 75024

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

Name of Employer Beal Bank Occupation Founder and Chairman

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
11 / 03 / 2015
Transaction ID : SA17.5914

Amount of Each Receipt this Period
100000.00

Carey account contribution

B. Margaret Bowman
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 12199

City San Antonio State TX Zip Code 78212

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

Name of Employer Self-Employed Occupation Oil, mining, ranching

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
07 / 06 / 2015
Transaction ID : SA17.5871

Amount of Each Receipt this Period
100000.00

Carey account contribution

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

Mailing Address P.O. Box 12199

City San Antonio State TX Zip Code 78212

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

Name of Employer Self-Employed Occupation Oil, mining, ranching

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
11 / 11 / 2015
Transaction ID : SA17.5924

Amount of Each Receipt this Period
100000.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	300000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Daniel Brower
Full Name (Last, First, Middle Initial)

Mailing Address 691 Brewster St

City Fairbanks State AK Zip Code 99712

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA17.5921

Amount of Each Receipt this Period
 150.00

Carey account contribution

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

Mailing Address 8822 Stable Crest Blvd

City Houston State TX Zip Code 77024

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

Name of Employer Requested Occupation Requested
 Self-Employed Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : SA17.5907

Amount of Each Receipt this Period
 100000.00

Carey account contribution

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

Mailing Address 2333 Smith Ave

City Chesapeake State VA Zip Code 23325

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

Name of Employer Requested Occupation Requested
 Miss Priss House Cleaning Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA17.5910

Amount of Each Receipt this Period
 50.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....	100200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Andre Huaman
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Franklin St Apt 306

City San Francisco State CA Zip Code 94109

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

Name of Employer Three Bell Capital LLC Occupation Partner

Receipt For: 2016
 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
 08 / 28 / 2015

Transaction ID : SA17.5890

Amount of Each Receipt this Period
 200.00

Carey account contribution

B. Thomas Jaeger
Full Name (Last, First, Middle Initial)

Mailing Address 51 Walnut St

City Mohnton State PA Zip Code 19540

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA17.5916

Amount of Each Receipt this Period
 100.00

Carey account contribution

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

Mailing Address 1500 Ocean Dr Unit 1105

City Miami Beach State FL Zip Code 33139

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

Name of Employer Chandler Management Corporation Occupation Real Estate Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333333.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA17.5912

Amount of Each Receipt this Period
 333333.33

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....	333633.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial)
A. Stan Kerr

Mailing Address 321 Fieldcrest Ct

City Normal State IL Zip Code 61761

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2015

Transaction ID : SA17.5859

Amount of Each Receipt this Period
25.00

Carey account contribution

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

Mailing Address 94 Cascade Key

City Bellevue State WA Zip Code 98006

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2015

Transaction ID : SA17.5893

Amount of Each Receipt this Period
10000.00

Carey account contribution

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

Mailing Address 310 Harrison St

City Alvo State NE Zip Code 68304

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

Name of Employer Self-Employed Occupation Operator

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA17.5918

Amount of Each Receipt this Period
25.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	10050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 128
<input 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 checked="" 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)
Concerned American Voters

A. Roger Leahy
Full Name (Last, First, Middle Initial)

Mailing Address 2096 Nutmeg Ave

City Fairfield State IA Zip Code 52556

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

Name of Employer Overland Sheepskin Co. Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA17.5932

Amount of Each Receipt this Period 350.00

Carey account contribution

B. Frayda Levin
Full Name (Last, First, Middle Initial)

Mailing Address 33 Crystal Rd

City Mountain Lakes State NJ Zip Code 07046

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 12 / 07 / 2015
Transaction ID : SA17.5926

Amount of Each Receipt this Period 50000.00

Carey account contribution

c. John Mackey
Full Name (Last, First, Middle Initial)

Mailing Address 1600 Windsor Rd

City Austin State TX Zip Code 78703

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

Name of Employer Co-CEO Occupation Whole Foods Market

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 07 / 13 / 2015
Transaction ID : SA17.5873

Amount of Each Receipt this Period 25000.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 75350.00

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 15 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial) A. John Mackey		Date of Receipt 10 / 24 / 2015 Transaction ID : SA17.5935
Mailing Address 1600 Windsor Rd		Amount of Each Receipt this Period 7068.12
City Austin State TX Zip Code 78703	FEC ID number of contributing federal political committee. C	In-kind - lodging and event costs
Name of Employer Co-CEO Occupation Whole Foods Market	Aggregate Year-to-Date 32068.12	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. John Mackey		Date of Receipt 12 / 09 / 2015 Transaction ID : SA17.5928
Mailing Address 1600 Windsor Rd		Amount of Each Receipt this Period 200000.00
City Austin State TX Zip Code 78703	FEC ID number of contributing federal political committee. C	Carey account contribution
Name of Employer Co-CEO Occupation Whole Foods Market	Aggregate Year-to-Date 232068.12	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. George Macricostas		Date of Receipt 12 / 11 / 2015 Transaction ID : SA17.5930
Mailing Address 930 Tahoe Blvd #802-525		Amount of Each Receipt this Period 500000.00
City Incline Village State NV Zip Code 89451	FEC ID number of contributing federal political committee. C	Carey account contribution
Name of Employer RagingWire Enterprise Solution Occupation Executive Board Member	Aggregate Year-to-Date 500000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	707068.12
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 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial)
A. Lawrence Marshall

Mailing Address 1002 Sandy Terrace Ct

City Port Orange State FL Zip Code 32129

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

Name of Employer ImmunoTek Bio Centers, LLC Occupation Compliance Manager

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2015

Transaction ID : SA17.5861

Amount of Each Receipt this Period
100.00

Carey account contribution

Full Name (Last, First, Middle Initial)
B. Paul Martino

Mailing Address 5 Theodore Way

City Doylestown State PA Zip Code 18901

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

Name of Employer Bullpen Capital Occupation Venture Capital

Receipt For: 2016
 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
07 / 01 / 2015

Transaction ID : SA17.5863

Amount of Each Receipt this Period
5000.00

Carey account contribution

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

Mailing Address 409 N Broadway St

City Scottsdale State PA Zip Code 15683

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

Name of Employer Baylor Trucking Occupation Truck Driver

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2015

Transaction ID : SA17.5869

Amount of Each Receipt this Period
25.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	5125.00
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 17 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial)
A. Robert Nelson

Mailing Address P.O. Box 1613

City State Zip Code
Prestonsburg KY 41653

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

Name of Employer Occupation
Mountain Aggregates, Inc. Equipment Manager

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt
11 / 10 / 2015
Transaction ID : SA17.5923

Amount of Each Receipt this Period
20.00

Carey account contribution

Full Name (Last, First, Middle Initial)
B. Lance Newman

Mailing Address 255 Kolpark Dr

City State Zip Code
Chambersburg PA 17202

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

Name of Employer Occupation
eLynxx Corporation Software Developer

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
08 / 16 / 2015
Transaction ID : SA17.5884

Amount of Each Receipt this Period
50.00

Carey account contribution

Full Name (Last, First, Middle Initial)
C. PURPLE PAC INC

Mailing Address 1747 PENNSYLVANIA AVE, NW
SUITE 1000

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00544569**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
10 / 07 / 2015
Transaction ID : SA17.5898

Amount of Each Receipt this Period
250000.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 250070.00

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 18 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Chris Rufer
Full Name (Last, First, Middle Initial)

Mailing Address 724 Main St

City Woodland State CA Zip Code 95695

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

Name of Employer The Morning Star Company Occupation Agriculturalist

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620000.00

Date of Receipt 11 / 17 / 2015
Transaction ID : SA17.5925

Amount of Each Receipt this Period 500000.00

Carey account contribution

B. Vickie Sather
Full Name (Last, First, Middle Initial)

Mailing Address 391 S Providence Ct

City Pahrump State NV Zip Code 89048

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

Name of Employer Retired Occupation Letter Carrier

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 01 / 2015
Transaction ID : SA17.5865

Amount of Each Receipt this Period 25.00

Carey account contribution

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

Mailing Address 1446 Englert Rd

City Eagan State MN Zip Code 55122

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

Name of Employer Self-Employed Occupation Finance

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt 10 / 20 / 2015
Transaction ID : SA17.5905

Amount of Each Receipt this Period 10.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	500035.00
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 19 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

A. Burr Smith
Full Name (Last, First, Middle Initial)

Mailing Address 453 N Lindberg Blvd Fl 2

City Saint Louis State MO Zip Code 63141

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

Name of Employer JEDFam Group Occupation Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : SA17.5896

Amount of Each Receipt this Period
 100000.00

Carey account contribution

B. Thomas Tierney
Full Name (Last, First, Middle Initial)

Mailing Address 33 Four Brooks Cir

City Stamford State CT Zip Code 06903

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

Name of Employer S-One Communications Occupation Project Manager

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2015
Transaction ID : SA17.5875

Amount of Each Receipt this Period
 25.00

Carey account contribution

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

Mailing Address 2641 Dakota Blvd Apt 306

City Dickinson State ND Zip Code 58601

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

Name of Employer Aggreko Occupation Tech

Receipt For: 2016
 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
 07 / 01 / 2015
Transaction ID : SA17.5867

Amount of Each Receipt this Period
 200.00

Carey account contribution

SUBTOTAL of Receipts This Page (optional).....▶	100225.00
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 20 OF 128
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Concerned American Voters

Full Name (Last, First, Middle Initial) A. Michael Topalovich		Date of Receipt MM / DD / YYYY 07 / 20 / 2015 Transaction ID : SA17.5879
Mailing Address 1359 N Noble St #401		Amount of Each Receipt this Period 25.00
City Chicago	State IL	Zip Code 60642
FEC ID number of contributing federal political committee. C		Carey account contribution
Name of Employer Delivered Innovation	Occupation Salesforce Architect and CTO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) B. Michael Topalovich		Date of Receipt MM / DD / YYYY 07 / 20 / 2015 Transaction ID : SA17.5880
Mailing Address 1359 N Noble St #401		Amount of Each Receipt this Period 5.00
City Chicago	State IL	Zip Code 60642
FEC ID number of contributing federal political committee. C		Carey account contribution
Name of Employer Delivered Innovation	Occupation Salesforce Architect and CTO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Full Name (Last, First, Middle Initial) C. Michael Topalovich		Date of Receipt MM / DD / YYYY 07 / 20 / 2015 Transaction ID : SA17.5881
Mailing Address 1359 N Noble St #401		Amount of Each Receipt this Period 5.00
City Chicago	State IL	Zip Code 60642
FEC ID number of contributing federal political committee. C		Carey account contribution
Name of Employer Delivered Innovation	Occupation Salesforce Architect and CTO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35.00	

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	3232051.45

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. John Mackey

Mailing Address 1600 Windsor Rd

City Austin State TX Zip Code 78703

Purpose of Disbursement
In-kind - lodging and event costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : SB21B.5936

Amount of Each Disbursement this Period

7068.12

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

7068.12

7068.12

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.5936

Carey account in-kind contribution. Disbursement entry automatically generated by FECFile on line 21(b) instead of 17.

Form/Schedule:

Transaction ID:

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Alamo Car Rental

Mailing Address 5800 Fleur Dr

City Des Moines State IA Zip Code 50321

Purpose of Disbursement
Carey acct - Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : **SB29.6067**

Amount of Each Disbursement this Period

57.59

Full Name (Last, First, Middle Initial)

B. Alamo Car Rental

Mailing Address 5800 Fleur Dr

City Des Moines State IA Zip Code 50321

Purpose of Disbursement
Carey acct - Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2015

Transaction ID : **SB29.6101**

Amount of Each Disbursement this Period

49.83

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 440 Terry Ave N

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Carey acct - Technology - computer equipment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2015

Transaction ID : **SB29.6037**

Amount of Each Disbursement this Period

169.89

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

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

277.31

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2015

Transaction ID : SB29.6054

Amount of Each Disbursement this Period

181.95

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2015

Transaction ID : SB29.6055

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2015

Transaction ID : SB29.6064

Amount of Each Disbursement this Period

186.60

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

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

393.55

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : SB29.6068

Amount of Each Disbursement this Period

25.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Gabriel Aquino

Mailing Address 14508 Kestral Ct

City Woodbridge State VA Zip Code 22193

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SB29.6129

Amount of Each Disbursement this Period

30.68

Category/
Type

Full Name (Last, First, Middle Initial)

C. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SB29.6131

Amount of Each Disbursement this Period

55.00

Category/
Type

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

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

110.68

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2015

Transaction ID : SB29.6138

Amount of Each Disbursement this Period

155.00

Full Name (Last, First, Middle Initial)

B. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SB29.6180

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

C. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : SB29.6193

Amount of Each Disbursement this Period

1705.65

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

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

1985.65

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 600 Jefferson St Ste 1900

City Houston State TX Zip Code 77002

Purpose of Disbursement
Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : **SB29.6193.0**

Amount of Each Disbursement this Period

4	6	3	.	2	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Thrifty Car Rental

Mailing Address 7135 Gilespie St

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : **SB29.6193.1**

Amount of Each Disbursement this Period

2	6	9	.	2	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Circus Circus Hotel

Mailing Address 2880 Las Vegas Blvd

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	5

Transaction ID : **SB29.6193.2**

Amount of Each Disbursement this Period

3	2	5	.	9	2
---	---	---	---	---	---

[MEMO ITEM]

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

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

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2015

Transaction ID : SB29.6200

Amount of Each Disbursement this Period

452.70

Category/
Type

Full Name (Last, First, Middle Initial)

B. El Cortez Hotel

Mailing Address 600 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	07	/	2015

Transaction ID : SB29.6200.0

Amount of Each Disbursement this Period

310.68

Category/
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Eric Armetta

Mailing Address 930 Spencer Ave

City Clearwater State FL Zip Code 33756

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2015

Transaction ID : SB29.6205

Amount of Each Disbursement this Period

1334.26

Category/
Type

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

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

1786.96

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 600 Jefferson St Ste 1900

City Houston State TX Zip Code 77002

Purpose of Disbursement
Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2015

Transaction ID : SB29.6205.0

Amount of Each Disbursement this Period

700.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. iFix LV Phone & PC Repair

Mailing Address 3909 W Sahara Ave Ste 6

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement
Technology - maintenance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2015

Transaction ID : SB29.6205.1

Amount of Each Disbursement this Period

291.84

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2015

Transaction ID : SB29.6115

Amount of Each Disbursement this Period

921.30

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

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

921.30

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Great Western Car Rental

Mailing Address 1026 Army Post Rd

City Des Moines State IA Zip Code 50315

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2015

Transaction ID : SB29.6115.0

Amount of Each Disbursement this Period

921.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2015

Transaction ID : SB29.6117

Amount of Each Disbursement this Period

548.80

Full Name (Last, First, Middle Initial)

C. Clarion Hotel

Mailing Address 2525 N Dodge St

City Iowa City State IA Zip Code 52245

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : SB29.6117.0

Amount of Each Disbursement this Period

548.80

[MEMO ITEM]

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

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

548.80

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : SB29.6118

Amount of Each Disbursement this Period

770.56

Full Name (Last, First, Middle Initial)

B. Clarion Hotel

Mailing Address 2525 N Dodge St

City Iowa City State IA Zip Code 52245

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2015

Transaction ID : SB29.6118.0

Amount of Each Disbursement this Period

548.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Travelodge

Mailing Address 2216 N Dodge St

City Iowa City State IA Zip Code 52245

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : SB29.6118.1

Amount of Each Disbursement this Period

221.76

[MEMO ITEM]

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

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

770.56

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SB29.6119

Amount of Each Disbursement this Period

145.58

Full Name (Last, First, Middle Initial)

B. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SB29.6122

Amount of Each Disbursement this Period

604.80

Full Name (Last, First, Middle Initial)

C. Days Inn

Mailing Address 1809 LaPorte Rd

City Waterloo State IA Zip Code 50702

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2015

Transaction ID : SB29.6122.0

Amount of Each Disbursement this Period

537.60

[MEMO ITEM]

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

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

750.38

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2015

Transaction ID : SB29.6123

Amount of Each Disbursement this Period

423.30

Full Name (Last, First, Middle Initial)

B. Days Inn

Mailing Address 3202 E Kimberly Rd

City Davenport State IA Zip Code 52807

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2015

Transaction ID : SB29.6123.0

Amount of Each Disbursement this Period

423.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2015

Transaction ID : SB29.6125

Amount of Each Disbursement this Period

921.30

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

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

1344.60

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Great Western Car Rental

Mailing Address 1026 Army Post Rd

City Des Moines State IA Zip Code 50315

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2015

Transaction ID : **SB29.6125.0**

Amount of Each Disbursement this Period

921.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Timothy Bertram

Mailing Address 5101 SE 14th St

City Des Moines State IA Zip Code 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2015

Transaction ID : **SB29.6126**

Amount of Each Disbursement this Period

480.83

Full Name (Last, First, Middle Initial)

C. Travelodge

Mailing Address 2216 N Dodge St

City Iowa City State IA Zip Code 52245

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2015

Transaction ID : **SB29.6126.0**

Amount of Each Disbursement this Period

480.83

[MEMO ITEM]

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

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

480.83

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Timothy Bertram

Mailing Address 5101 SE 14th St

City State Zip Code
Des Moines IA 50320

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2015

Transaction ID : SB29.6136

Amount of Each Disbursement this Period

537.60

Full Name (Last, First, Middle Initial)

B. Days Inn

Mailing Address 3040 5th Ave South

City State Zip Code
Fort Dodge IA 50501

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SB29.6136.0

Amount of Each Disbursement this Period

235.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. South T Motel

Mailing Address 1004 S Grand Ave

City State Zip Code
Spencer IA 51301

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2015

Transaction ID : SB29.6136.1

Amount of Each Disbursement this Period

302.40

[MEMO ITEM]

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

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

537.60

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. BK Strategies, LLC

Mailing Address 320 23rd St S Ste 1003

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Carey acct - Polling

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2015

Transaction ID : SB29.6076

Amount of Each Disbursement this Period

13800.00

Full Name (Last, First, Middle Initial)

B. Faith Braverman

Mailing Address P.O. Box 425

City Fulshear State TX Zip Code 78155

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2015

Transaction ID : SB29.6146

Amount of Each Disbursement this Period

28.50

Full Name (Last, First, Middle Initial)

C. Faith Braverman

Mailing Address P.O. Box 425

City Fulshear State TX Zip Code 78155

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : SB29.6159

Amount of Each Disbursement this Period

71.95

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

13900.45

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Faith Braverman

Mailing Address P.O. Box 425

City State Zip Code
Fulshear TX 78155

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2015

Transaction ID : SB29.6181

Amount of Each Disbursement this Period

15.01

Full Name (Last, First, Middle Initial)

B. Burger King

Mailing Address McCarren International Airport

City State Zip Code
Las Vegas NV 89119

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2015

Transaction ID : SB29.6057

Amount of Each Disbursement this Period

14.79

Full Name (Last, First, Middle Initial)

C. Ryan Cahill

Mailing Address 3440 Golfview Dr #104

City State Zip Code
Eagan MN 55123

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2015

Transaction ID : SB29.6152

Amount of Each Disbursement this Period

55.00

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

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

84.80

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

Use separate schedule(s)
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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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Ryan Cahill

Mailing Address 3440 Golfview Dr #104

City Eagan State MN Zip Code 55123

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SB29.6182

Amount of Each Disbursement this Period

173.27

Full Name (Last, First, Middle Initial)

B. Ryan Cahill

Mailing Address 3440 Golfview Dr #104

City Eagan State MN Zip Code 55123

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : SB29.6194

Amount of Each Disbursement this Period

45.52

Full Name (Last, First, Middle Initial)

C. Jacob Champion

Mailing Address 5403 Landmark Pl

City Fairfax State VA Zip Code 22032

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SB29.6161

Amount of Each Disbursement this Period

192.84

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

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

411.63

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Jacob Champion

Mailing Address 5403 Landmark Pl

City Fairfax State VA Zip Code 22032

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SB29.6183

Amount of Each Disbursement this Period

99.56

Full Name (Last, First, Middle Initial)

B. Chevron

Mailing Address 7310 S Las Vegas Blvd

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement
Carey acct - Travel - gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SB29.6103

Amount of Each Disbursement this Period

5.07

Full Name (Last, First, Middle Initial)

C. Nick D'Auteuil

Mailing Address 432 Sycamore Dr, #3

City Decatur State GA Zip Code 30030

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SB29.6163

Amount of Each Disbursement this Period

65.94

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

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

170.57

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Nick D'Auteuil

Mailing Address 432 Sycamore Dr, #3

City Decatur State GA Zip Code 30030

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : SB29.6195

Amount of Each Disbursement this Period

60.20

Full Name (Last, First, Middle Initial)

B. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SB29.5974

Amount of Each Disbursement this Period

16666.66

Full Name (Last, First, Middle Initial)

C. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2015

Transaction ID : SB29.5989

Amount of Each Disbursement this Period

8333.33

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

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

25060.19

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

Use separate schedule(s)
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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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2015

Transaction ID : SB29.6002

Amount of Each Disbursement this Period

8632.17

Full Name (Last, First, Middle Initial)

B. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2015

Transaction ID : SB29.6003

Amount of Each Disbursement this Period

8333.33

Full Name (Last, First, Middle Initial)

C. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2015

Transaction ID : SB29.6031

Amount of Each Disbursement this Period

8333.33

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

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

25298.83

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SB29.6032

Amount of Each Disbursement this Period

7106.06

Full Name (Last, First, Middle Initial)

B. Dagny, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SB29.6080

Amount of Each Disbursement this Period

8333.33

Full Name (Last, First, Middle Initial)

C. Danneskjold, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SB29.5976

Amount of Each Disbursement this Period

33333.33

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

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

48772.72

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Danneskjold, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5990

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Danneskjold, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6004

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Danneskjold, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6033

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Danneskjold, LLC

Mailing Address 111 3rd St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Carey acct - Consulting - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6081

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies

Mailing Address 203 South Union St Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Legal & compliance services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5970

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies

Mailing Address 203 South Union St Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Legal & compliance services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6378

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies

Mailing Address 203 South Union St Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Legal & compliance services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5996

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies

Mailing Address 203 South Union St Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Legal & compliance services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6017

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies

Mailing Address 203 South Union St Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Legal & compliance services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6091

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Des Moines Water Works

Mailing Address 2201 George Flagg Pkwy

City Des Moines State IA Zip Code 50321

Purpose of Disbursement
Carey acct - Office overhead - water

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
07 / 27 / 2015

Transaction ID : SB29.5969

Amount of Each Disbursement this Period

19.34

Full Name (Last, First, Middle Initial)

B. Shea Dobson

Mailing Address 100 Roberts Cir

City Ocean Springs State MS Zip Code 39564

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 12 / 2015

Transaction ID : SB29.6128

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. Shea Dobson

Mailing Address 100 Roberts Cir

City Ocean Springs State MS Zip Code 39564

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 13 / 2015

Transaction ID : SB29.6132

Amount of Each Disbursement this Period

30.00

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

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

79.34

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Dotsquare, LLC

Mailing Address 3180 18th St #100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Geocode lookups

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SB29.6105

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. El Cortez Hotel

Mailing Address 600 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 11 / 2015

Transaction ID : SB29.6040

Amount of Each Disbursement this Period

356.20

Full Name (Last, First, Middle Initial)

C. Elegant Limousine & Charter

Mailing Address 9501 Cargo Avenue Ste 200

City Austin State TX Zip Code 78719

Purpose of Disbursement
Carey acct - Travel - taxi

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SB29.6009

Amount of Each Disbursement this Period

215.00

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

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

1321.20

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Elegant Limousine & Charter

Mailing Address 9501 Cargo Avenue Ste 200

City Austin State TX Zip Code 78719

Purpose of Disbursement
Carey acct - Travel - taxi

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : SB29.6018

Amount of Each Disbursement this Period

210.00

Full Name (Last, First, Middle Initial)

B. FedEx Office

Mailing Address 10201 University Ave

City Clive State IA Zip Code 50325

Purpose of Disbursement
Carey acct - Office overhead - printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SB29.6010

Amount of Each Disbursement this Period

376.71

Full Name (Last, First, Middle Initial)

C. Flippin' Good Burgers

Mailing Address 505 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2015

Transaction ID : SB29.6045

Amount of Each Disbursement this Period

32.48

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

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

619.19

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. GoDaddy.com

Mailing Address 14455 N Hayden Rd Ste 219

City State Zip Code
Scottsdale AZ 85260

Purpose of Disbursement
Carey acct - Technology - domain registration

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5965

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Gogo

Mailing Address 303 S Technology Ct # A

City State Zip Code
Broomfield CO 80021

Purpose of Disbursement
Carey acct - Travel - internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6042

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Gogo

Mailing Address 303 S Technology Ct # A

City State Zip Code
Broomfield CO 80021

Purpose of Disbursement
Carey acct - Travel - internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6092

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Gogo

Mailing Address 303 S Technology Ct # A

City Broomfield State CO Zip Code 80021

Purpose of Disbursement
Carey acct - Travel - internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SB29.6106

Amount of Each Disbursement this Period

25.95

Full Name (Last, First, Middle Initial)

B. Golden Gate Hotel

Mailing Address 301 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Travel - parking

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2015

Transaction ID : SB29.6094

Amount of Each Disbursement this Period

4.00

Full Name (Last, First, Middle Initial)

C. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : SB29.5978

Amount of Each Disbursement this Period

12.90

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

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

42.85

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5984

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5999

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6025

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Advertising - Google AdWords

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 09 / 2015

Transaction ID : SB29.6034

Amount of Each Disbursement this Period

367.65

Full Name (Last, First, Middle Initial)

B. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 30 / 2015

Transaction ID : SB29.6077

Amount of Each Disbursement this Period

24.32

Full Name (Last, First, Middle Initial)

C. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Carey acct - Technology - Google Apps

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 31 / 2015

Transaction ID : SB29.6112

Amount of Each Disbursement this Period

25.00

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

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

416.97

**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)

Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Joel Hanson

Mailing Address 250 Oak Leaf Dr

City Winona State MN Zip Code 55987

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	5

Transaction ID : SB29.6165

Amount of Each Disbursement this Period

2	0	5	.	2	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Joel Hanson

Mailing Address 250 Oak Leaf Dr

City Winona State MN Zip Code 55987

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB29.6184

Amount of Each Disbursement this Period

3	4	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Jacqui Harvey

Mailing Address 1525 Clifton St Apt 119

City Conway State AR Zip Code 72032

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	5

Transaction ID : SB29.6140

Amount of Each Disbursement this Period

3	7	.	0	0
---	---	---	---	---

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

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

2	7	6	.	2	0
---	---	---	---	---	---

2	7	6	.	2	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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Jacqui Harvey

Mailing Address 1525 Clifton St Apt 119

City Conway State AR Zip Code 72032

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6153

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

B. Hertz Car Rental

Mailing Address 7135 Gilespie St

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement
Carey acct - Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6059

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

C. Holiday Inn

Mailing Address 1050 6th Ave

City Des Moines State IA Zip Code 50314

Purpose of Disbursement
Carey acct - Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6061

Amount of Each Disbursement this Period

Category/Type

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. iFix LV Phone & PC Repair

Mailing Address 3909 W Sahara Ave Ste 6

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement
Carey acct - Technology - maintenance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6049

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. iFix LV Phone & PC Repair

Mailing Address 3909 W Sahara Ave Ste 6

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement
Carey acct - Technology - maintenance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6050

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Infinity Box Inc.

Mailing Address 101 Lytton Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Carey acct - Technology - Wufoo.com

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5963

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial) A. Infinity Box Inc.		Date of Disbursement MM / DD / YYYY 08 / 01 / 2015
Mailing Address 101 Lytton Ave		Transaction ID : SB29.5980
City Palo Alto	State CA	
Purpose of Disbursement Carey acct - Technology - Wufoo.com		Amount of Each Disbursement this Period 14.95
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Infinity Box Inc.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 101 Lytton Ave		Transaction ID : SB29.5988
City Palo Alto	State CA	
Purpose of Disbursement Carey acct - Technology - Wufoo.com		Amount of Each Disbursement this Period 14.95
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Infinity Box Inc.		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015
Mailing Address 101 Lytton Ave		Transaction ID : SB29.6001
City Palo Alto	State CA	
Purpose of Disbursement Carey acct - Technology - Wufoo.com		Amount of Each Disbursement this Period 14.95
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	44.85
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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Infinity Box Inc.

Mailing Address 101 Lytton Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Carey acct - Technology - Wufoo.com

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6028

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Infinity Box Inc.

Mailing Address 101 Lytton Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Carey acct - Technology - Wufoo.com

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6079

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. iPhone iPad Fixer

Mailing Address 2401 26th Rd S

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Carey acct - Technology - maintenance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6074

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Jet Rock Bar and Grill

Mailing Address 2401 S Smith Blvd

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2015

Transaction ID : SB29.6096

Amount of Each Disbursement this Period

9.89

Full Name (Last, First, Middle Initial)

B. Edward King

Mailing Address 107 S. West St
PMB 813

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SB29.6157

Amount of Each Disbursement this Period

265.94

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 3804 Wilson Blvd

City Arlington State VA Zip Code 22203

Purpose of Disbursement
Office overhead - supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SB29.6157.0

Amount of Each Disbursement this Period

265.94

[MEMO ITEM]

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

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

275.83

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Edward King

Mailing Address 107 S. West St
PMB 813

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6158

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Edward King

Mailing Address 107 S. West St
PMB 813

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6185

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 600 Jefferson St Ste 1900

City Houston State TX Zip Code 77002

Purpose of Disbursement
Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6185.0

Amount of Each Disbursement this Period

Category/
Type

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Edward King

Mailing Address 107 S. West St
PMB 813

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6201

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Edward King

Mailing Address 107 S. West St
PMB 813

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6203

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Micah Kogok

Mailing Address 5940 Ripley Park Dr

City Silver Spring State MD Zip Code 20646

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6167

Amount of Each Disbursement this Period

Category/
Type

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Claire Leiter

Mailing Address 6948 Colorado Ave N

City State Zip Code
Brooklyn Park MN 55429

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6134

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Claire Leiter

Mailing Address 6948 Colorado Ave N

City State Zip Code
Brooklyn Park MN 55429

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6141

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Claire Leiter

Mailing Address 6948 Colorado Ave N

City State Zip Code
Brooklyn Park MN 55429

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6190

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. LiquidSpace

Mailing Address 520 Fremont St Ste 200

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - General operations - field staff meeting space

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6036

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. LiquidSpace

Mailing Address 520 Fremont St Ste 200

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - General operations - field staff meeting space

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6107

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MidAmerican Energy

Mailing Address PO Box 8020

City Davenport State IA Zip Code 52808

Purpose of Disbursement
Carey acct - Office overhead - utilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.5964

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. MidAmerican Energy

Mailing Address PO Box 8020

City Davenport State IA Zip Code 52808

Purpose of Disbursement
Carey acct - Office overhead - utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SB29.5971

Amount of Each Disbursement this Period

147.90

Full Name (Last, First, Middle Initial)

B. Kathleen Miucci

Mailing Address 1262 Missouri St

City San Diego State CA Zip Code 92109

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : SB29.6179

Amount of Each Disbursement this Period

143.14

Full Name (Last, First, Middle Initial)

C. Kathleen Miucci

Mailing Address 1262 Missouri St

City San Diego State CA Zip Code 92109

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SB29.6186

Amount of Each Disbursement this Period

50.34

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

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

341.38

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 2901 Gallows Rd

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Carey acct - Office overhead - supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2015

Transaction ID : SB29.6013

Amount of Each Disbursement this Period

83.34

Full Name (Last, First, Middle Initial)

B. Old Chicago

Mailing Address 3800 Merle Hay Rd

City Des Moines State IA Zip Code 50310

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2015

Transaction ID : SB29.6066

Amount of Each Disbursement this Period

122.59

Full Name (Last, First, Middle Initial)

C. Outback Steakhouse

Mailing Address 2202 N West Shore Blvd

City Tampa State FL Zip Code 33607

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : SB29.5998

Amount of Each Disbursement this Period

50.00

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

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

255.93

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 03 / 2015

Transaction ID : SB29.6114

Amount of Each Disbursement this Period

833.33

Full Name (Last, First, Middle Initial)

B. Best Western

Mailing Address 1518 3rd Ave NW

City State Zip Code
Fort Dodge IA 50501

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : SB29.6114.0

Amount of Each Disbursement this Period

232.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Americas Best Value Inn

Mailing Address 4402 Dakota Ave

City State Zip Code
South Sioux City NE 68776

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 02 / 2015

Transaction ID : SB29.6114.1

Amount of Each Disbursement this Period

243.68

[MEMO ITEM]

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

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

833.33

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6116

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Howard Johnson

Mailing Address 707 4th St

City Sioux City State IA Zip Code 51101

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6116.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address 10829 M St

City Omaha State NE Zip Code 68137

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6116.1

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2015

Transaction ID : SB29.6120

Amount of Each Disbursement this Period

825.91

Full Name (Last, First, Middle Initial)

B. Days Inn

Mailing Address 1258 8th St

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 19 / 2015

Transaction ID : SB29.6120.0

Amount of Each Disbursement this Period

526.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2015

Transaction ID : SB29.6121

Amount of Each Disbursement this Period

357.28

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

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

1183.19

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Motel 6

Mailing Address 7655 Office Plaza Dr N

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2015

Transaction ID : SB29.6121.0

Amount of Each Disbursement this Period

357.28

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2015

Transaction ID : SB29.6124

Amount of Each Disbursement this Period

833.65

Full Name (Last, First, Middle Initial)

C. Days Inn

Mailing Address 1600 NW 114th St

City State Zip Code
Clive IA 50325

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2015

Transaction ID : SB29.6124.0

Amount of Each Disbursement this Period

503.70

[MEMO ITEM]

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

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

833.65

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SB29.6135

Amount of Each Disbursement this Period

677.32

Full Name (Last, First, Middle Initial)

B. Enterprise Car Rental

Mailing Address 1409 Fuller Rd

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : SB29.6135.0

Amount of Each Disbursement this Period

649.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2015

Transaction ID : SB29.6137

Amount of Each Disbursement this Period

368.71

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

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

1046.03

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

Transaction ID : SB29.6144

Amount of Each Disbursement this Period

235.04

Full Name (Last, First, Middle Initial)

B. Super 8 Motel

Mailing Address 7111 Spring St

City Omaha State NE Zip Code 68106

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

Transaction ID : SB29.6144.0

Amount of Each Disbursement this Period

235.04

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2015

Transaction ID : SB29.6147

Amount of Each Disbursement this Period

649.73

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

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

884.77

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Enterprise Car Rental

Mailing Address 1409 Fuller Rd

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB29.6147.0

Amount of Each Disbursement this Period

344.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hotel Ottumwa

Mailing Address 107 E Second St

City Ottumwa State IA Zip Code 52501

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2015

Transaction ID : SB29.6147.1

Amount of Each Disbursement this Period

234.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2015

Transaction ID : SB29.6148

Amount of Each Disbursement this Period

404.60

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

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

404.60

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Ramada Inn

Mailing Address 130 Nebraska St

City State Zip Code
Sioux City IA 51101

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 27 / 2015

Transaction ID : SB29.6148.0

Amount of Each Disbursement this Period

404.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 24 / 2015

Transaction ID : SB29.6149

Amount of Each Disbursement this Period

506.89

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address 2111 West Sreet South

City State Zip Code
Grinnell IA 50112

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 20 / 2015

Transaction ID : SB29.6149.0

Amount of Each Disbursement this Period

240.77

[MEMO ITEM]

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

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

506.89

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6150

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6154

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Enterprise Car Rental

Mailing Address 1409 Fuller Rd

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6154.0

Amount of Each Disbursement this Period

Category/
Type

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Days Inn

Mailing Address 1111 Dodge St

City State Zip Code
Dubuque IA 52003

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 02 / 2015

Transaction ID : SB29.6154.1

Amount of Each Disbursement this Period

201.57

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 22 / 2015

Transaction ID : SB29.6156

Amount of Each Disbursement this Period

1316.42

Full Name (Last, First, Middle Initial)

C. Days Inn

Mailing Address 2215 Blairs Ferry Rd NE

City State Zip Code
Cedar Rapids IA 52402

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 17 / 2015

Transaction ID : SB29.6156.0

Amount of Each Disbursement this Period

341.40

[MEMO ITEM]

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

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

1316.42

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Enterprise Car Rental

Mailing Address 1409 Fuller Rd

City State Zip Code
West Des Moines IA 50265

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SB29.6156.1

Amount of Each Disbursement this Period

370.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : SB29.6178

Amount of Each Disbursement this Period

848.91

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address 2809 4th Ave S

City State Zip Code
Clear Lake IA 50428

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SB29.6178.0

Amount of Each Disbursement this Period

231.84

[MEMO ITEM]

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

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

848.91

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City St. Paul State MN Zip Code 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

Transaction ID : SB29.6189

Amount of Each Disbursement this Period

6	2	1	.	1	2
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Full Name (Last, First, Middle Initial)

B. Days Inn

Mailing Address 1258 8th St

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2015			

Transaction ID : SB29.6189.0

Amount of Each Disbursement this Period

2	4	0	.	6	5
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Days Inn

Mailing Address 1258 8th St

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2015			

Transaction ID : SB29.6189.1

Amount of Each Disbursement this Period

2	3	5	.	0	5
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[MEMO ITEM]

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

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

6	2	1	.	1	2
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6	2	1	.	1	2
---	---	---	---	---	---

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

Transaction ID : SB29.6191

Amount of Each Disbursement this Period

833.67

Full Name (Last, First, Middle Initial)

B. Alamo Car Rental

Mailing Address 7135 Gilespie St

City State Zip Code
Las Vegas NV 89119

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2015			

Transaction ID : SB29.6191.0

Amount of Each Disbursement this Period

237.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address 1213 Las Vegas Blvd S

City State Zip Code
Las Vegas NV 89104

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2015			

Transaction ID : SB29.6191.1

Amount of Each Disbursement this Period

369.24

[MEMO ITEM]

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

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

833.67

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : SB29.6192

Amount of Each Disbursement this Period

950.57

Full Name (Last, First, Middle Initial)

B. Stratosphere

Mailing Address 2000 Las Vegas Blvd S

City State Zip Code
Las Vegas NV 89104

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2015

Transaction ID : SB29.6192.0

Amount of Each Disbursement this Period

286.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Golden Gate Hotel

Mailing Address 301 Fremont St

City State Zip Code
Las Vegas NV 89101

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : SB29.6192.1

Amount of Each Disbursement this Period

336.49

[MEMO ITEM]

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

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

950.57

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Matthew Pagano

Mailing Address 35 Lexington Pkwy Apt 36

City State Zip Code
St. Paul MN 55105

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 07 / 2015

Transaction ID : **SB29.6196**

Amount of Each Disbursement this Period

782.86

Full Name (Last, First, Middle Initial)

B. Alamo Car Rental

Mailing Address 7135 Gilespie St

City State Zip Code
Las Vegas NV 89119

Purpose of Disbursement
Travel - rental car

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 02 / 2015

Transaction ID : **SB29.6196.0**

Amount of Each Disbursement this Period

500.31

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2221 N 1st St

City State Zip Code
San Jose CA 95131

Purpose of Disbursement
Carey acct - Technology - online payment system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 31 / 2015

Transaction ID : **SB29.5986**

Amount of Each Disbursement this Period

8.51

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

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

791.37

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2221 N 1st St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Carey acct - Technology - online payment system processing fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.6000

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PayPal

Mailing Address 2221 N 1st St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Carey acct - Technology - online payment system processing fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.6026

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Pei Wei

Mailing Address 5757 Wayne Newton Blvd

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.6109

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Phillips 66

Mailing Address 5901 Fleur Dr

City Des Moines State IA Zip Code 50231

Purpose of Disbursement
Carey acct - Travel - gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.6070**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Pinkston Group

Mailing Address 5270 Shawnee Rd Ste 102

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Carey acct - Consulting - media

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.5973**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Pinkston Group

Mailing Address 5270 Shawnee Rd Ste 102

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Carey acct - Consulting - media

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.5994**

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Pure Hypnosis LLC

Mailing Address 3290 Clairmont North NE

City Brookhaven State GA Zip Code 30329

Purpose of Disbursement
Carey acct - Marketing - consulting fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : **SB29.6086**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. RaceTrac

Mailing Address 2111 W Mockingbird Ln

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Carey acct - Travel - gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : **SB29.6020**

Amount of Each Disbursement this Period

9.53

Full Name (Last, First, Middle Initial)

C. Thomas Radke

Mailing Address 1123 N 21st St

City Superior State WI Zip Code 54800

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : **SB29.6169**

Amount of Each Disbursement this Period

98.02

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

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

1607.55

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Red Edge, LLC

Mailing Address 2300 Clarendon Blvd Ste 901

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Carey acct - Creative production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : **SB29.6082**

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

B. Rayden Ross

Mailing Address 7513 North Shore Circle N

City Forest Lake State MN Zip Code 55025

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : **SB29.6171**

Amount of Each Disbursement this Period

51.63

Full Name (Last, First, Middle Initial)

C. Shell Gas Station

Mailing Address 4207 S Las Vegas Blvd

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Carey acct - Travel - gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2015

Transaction ID : **SB29.6063**

Amount of Each Disbursement this Period

10.49

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

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

8062.12

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Jacob Sherretts

Mailing Address 137 Longfellow Ave

City North Babylon State NY Zip Code 11703

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6188

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Siegel's 1941

Mailing Address 600 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6098

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Timothy Simons

Mailing Address 1692 Plank Rd

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6173

Amount of Each Disbursement this Period

Category/
Type

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Robert Smith

Mailing Address 1131 Maple St

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	30	/	2015

Transaction ID : SB29.6175

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 3804 Wilson Blvd

City Arlington State VA Zip Code 22203

Purpose of Disbursement
Carey acct - Office overhead - supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SB29.6012

Amount of Each Disbursement this Period

83.68

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Technology - online contribution system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	31	/	2015

Transaction ID : SB29.5979

Amount of Each Disbursement this Period

16.97

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

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

280.65

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Technology - online contribution system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

Transaction ID : SB29.5987

Amount of Each Disbursement this Period

7.85

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Technology - online contribution system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	31	/	2015

Transaction ID : SB29.6027

Amount of Each Disbursement this Period

8.74

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Technology - online contribution system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2015

Transaction ID : SB29.6078

Amount of Each Disbursement this Period

10.79

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

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

27.38

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Carey acct - Technology - online contribution system processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 31 / 2015

Transaction ID : SB29.6113

Amount of Each Disbursement this Period

10.45

Full Name (Last, First, Middle Initial)

B. Tara Struzinski

Mailing Address 928 Riviera St

City Venice State FL Zip Code 34285

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 30 / 2015

Transaction ID : SB29.6177

Amount of Each Disbursement this Period

125.70

Full Name (Last, First, Middle Initial)

C. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 27 / 2015

Transaction ID : SB29.6143

Amount of Each Disbursement this Period

30.00

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

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

166.15

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SB29.6155

Amount of Each Disbursement this Period

50.05

Full Name (Last, First, Middle Initial)

B. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : SB29.6197

Amount of Each Disbursement this Period

623.43

Full Name (Last, First, Middle Initial)

C. Village Inn Motel

Mailing Address 1348 E Euclid Ave

City Des Moines State IA Zip Code 50316

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : SB29.6197.0

Amount of Each Disbursement this Period

239.88

[MEMO ITEM]

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

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

673.48

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. La Quinta Inn

Mailing Address 1390 NW 118th St

City Clive State IA Zip Code 50325

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2015			

Transaction ID : SB29.6197.1

Amount of Each Disbursement this Period

333.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2015			

Transaction ID : SB29.6198

Amount of Each Disbursement this Period

251.25

Full Name (Last, First, Middle Initial)

C. Extended Stay America

Mailing Address 2701 Westown Pkwy

City West Des Moines State IA Zip Code 50266

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2015			

Transaction ID : SB29.6198.0

Amount of Each Disbursement this Period

251.25

[MEMO ITEM]

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

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

251.25

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2015

Transaction ID : SB29.6202

Amount of Each Disbursement this Period

81.00

Full Name (Last, First, Middle Initial)

B. Adam Sullivan

Mailing Address 1819 Chelsea Ct

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		24		2015

Transaction ID : SB29.6204

Amount of Each Disbursement this Period

667.76

Full Name (Last, First, Middle Initial)

C. El Cortez Hotel

Mailing Address 600 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

Transaction ID : SB29.6204.0

Amount of Each Disbursement this Period

248.40

[MEMO ITEM]

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

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

748.76

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - website development, design, and implementation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2015

Transaction ID : SB29.5968

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - digital strategy and project management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2015

Transaction ID : SB29.5982

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - digital strategy and project management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2015

Transaction ID : SB29.5983

Amount of Each Disbursement this Period

5000.00

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

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

30000.00

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - digital strategy and project management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

Transaction ID : SB29.6005

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - digital strategy and project management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : SB29.6030

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Terra Eclipse, Inc.

Mailing Address 600 F St NW Ste 400

City Washington State DC Zip Code 20004

Purpose of Disbursement
Carey acct - Technology - digital strategy and project management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2015

Transaction ID : SB29.6084

Amount of Each Disbursement this Period

10000.00

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

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

30000.00

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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Texas Star

Mailing Address 9111 Interstate 35

City Jarrell State TX Zip Code 76537

Purpose of Disbursement
Carey acct - Travel - gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	5

Transaction ID : SB29.6022

Amount of Each Disbursement this Period

2	1	.	2	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. The Beat Coffeehouse

Mailing Address 520 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	6		2	0	1	5

Transaction ID : SB29.6100

Amount of Each Disbursement this Period

1	2	.	4	1
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. The D Hotel

Mailing Address 301 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Lodging - hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	1	5

Transaction ID : SB29.6090

Amount of Each Disbursement this Period

1	0	9	.	7	6
---	---	---	---	---	---

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

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

1	4	3	.	4	5
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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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. The UPS Store

Mailing Address 3033 Wilson Blvd Ste E

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Carey acct - Shipping costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
08 / 18 / 2015

Transaction ID : SB29.5981

Amount of Each Disbursement this Period

24.98

Full Name (Last, First, Middle Initial)

B. The UPS Store

Mailing Address 3033 Wilson Blvd Ste E

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Carey acct - Shipping costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 27 / 2015

Transaction ID : SB29.5995

Amount of Each Disbursement this Period

39.00

Full Name (Last, First, Middle Initial)

C. The UPS Store

Mailing Address 3033 Wilson Blvd Ste E

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Carey acct - Shipping costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 28 / 2015

Transaction ID : SB29.6024

Amount of Each Disbursement this Period

23.74

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

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

87.72

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. The UPS Store

Mailing Address 3033 Wilson Blvd Ste E

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Carey acct - Shipping costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 02 / 2015

Transaction ID : SB29.6083

Amount of Each Disbursement this Period

10.10

Full Name (Last, First, Middle Initial)

B. The UPS Store

Mailing Address 3033 Wilson Blvd Ste E

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Carey acct - Shipping costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 04 / 2015

Transaction ID : SB29.6085

Amount of Each Disbursement this Period

21.68

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 182 Howard St

City State Zip Code
San Francisco CA 94105

Purpose of Disbursement
Carey acct - Travel - taxi

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 16 / 2015

Transaction ID : SB29.6072

Amount of Each Disbursement this Period

15.15

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

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

46.93

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 600 Jefferson St Ste 1900

City Houston State TX Zip Code 77002

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	13	/	2015

Transaction ID : SB29.6051

Amount of Each Disbursement this Period

141.60

Full Name (Last, First, Middle Initial)

B. Veer West, LLC

Mailing Address 101 Kirkwood Ave Ste 224

City Bloomington State IN Zip Code 47404

Purpose of Disbursement
Carey acct - Technology - FormAssembly.com

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2015

Transaction ID : SB29.6111

Amount of Each Disbursement this Period

130.00

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement
Carey acct - Office overhead - internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	16	/	2015

Transaction ID : SB29.5966

Amount of Each Disbursement this Period

360.24

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

631.84

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 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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement
Carey acct - Office overhead - internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : SB29.5991

Amount of Each Disbursement this Period

245.87

Category/
Type

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement
Carey acct - Office overhead - internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2015

Transaction ID : SB29.5992

Amount of Each Disbursement this Period

150.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement
Carey acct - Office overhead - internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

Transaction ID : SB29.5993

Amount of Each Disbursement this Period

100.26

Category/
Type

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

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

496.13

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement
Carey acct - Office overhead - internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : SB29.6029

Amount of Each Disbursement this Period

97.74

Full Name (Last, First, Middle Initial)

B. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2015

Transaction ID : SB29.6007

Amount of Each Disbursement this Period

482.40

Full Name (Last, First, Middle Initial)

C. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2015

Transaction ID : SB29.6014

Amount of Each Disbursement this Period

25.00

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

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

605.14

**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

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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 26 / 2015

Transaction ID : SB29.6023

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 10 / 2015

Transaction ID : SB29.6038

Amount of Each Disbursement this Period

429.60

Full Name (Last, First, Middle Initial)

C. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 11 / 2015

Transaction ID : SB29.6043

Amount of Each Disbursement this Period

25.00

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

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

504.60

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Virgin America

Mailing Address 555 Airport Blvd Ste 400

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Carey acct - Travel - flight

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : **SB29.6088**

Amount of Each Disbursement this Period

445.20

Full Name (Last, First, Middle Initial)

B. Voter Contact Services, LLC

Mailing Address 107 S. West St, PMB 501

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Carey acct - Voter contact - data management services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2015

Transaction ID : **SB29.6087**

Amount of Each Disbursement this Period

35353.34

Full Name (Last, First, Middle Initial)

C. Walgreens

Mailing Address 495 Fremont St

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Office overhead - supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2015

Transaction ID : **SB29.6047**

Amount of Each Disbursement this Period

7.00

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

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

35805.54

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 2701 S Interstate 35

City Round Rock State TX Zip Code 78664

Purpose of Disbursement
Carey acct - Office overhead - supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 24 / 2015

Transaction ID : SB29.6016

Amount of Each Disbursement this Period

378.64

Full Name (Last, First, Middle Initial)

B. Christopher Wells

Mailing Address 531 Winthron Ct

City Murfreesboro State TN Zip Code 37128

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 13 / 2015

Transaction ID : SB29.6199

Amount of Each Disbursement this Period

30.29

Full Name (Last, First, Middle Initial)

C. Christopher Wells

Mailing Address 531 Winthron Ct

City Murfreesboro State TN Zip Code 37128

Purpose of Disbursement
Carey acct - Reimbursement for PAC expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SB29.6206

Amount of Each Disbursement this Period

25.00

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

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

433.93

**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)
Concerned American Voters

Full Name (Last, First, Middle Initial)

A. Zydeco Po-Boys

Mailing Address 616 E Carson Ave

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement
Carey acct - Travel - food

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	1	5		

Transaction ID : SB29.6053

Amount of Each Disbursement this Period

1	3	.	0	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--

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

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

1	3	.	0	5
---	---	---	---	---

3	5	4	9	6	.	4	6
---	---	---	---	---	---	---	---

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Concerned American Voters

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Eric Armetta

Nature of Debt (Purpose):

Advance of funds for PAC expenses - reimbursed 1/11/16

Mailing Address 930 Spencer Ave

City State Zip Code
Clearwater FL 33756

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6376

Amount Incurred This Period

711.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

711.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ▶

711.84

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

711.84

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

711.84

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Carter Printing Company
Mailing Address 1739 East Grand Ave
City Des Moines State IA Zip Code 50316
Purpose of Expenditure Door Hangers Category/Type 004
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: IA
Disbursement For: Primary General 2016
Calendar Year-To-Date Per Election for Office Sought 515248.86
Date of Public Distribution/Dissemination 07 / 17 / 2015
Amount 2374.18
Transaction ID : SE.5314
Date of Disbursement or Obligation 07 / 17 / 2015

Full Name of Payee
Carter Printing Company
Mailing Address 1739 East Grand Ave
City Des Moines State IA Zip Code 50316
Purpose of Expenditure Door Hangers Category/Type 004
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: IA
Disbursement For: Primary General 2016
Calendar Year-To-Date Per Election for Office Sought 856716.45
Date of Public Distribution/Dissemination 08 / 11 / 2015
Amount 3799.20
Transaction ID : SE.5667
Date of Disbursement or Obligation 08 / 21 / 2015

(a) SUBTOTAL of Itemized Independent Expenditures 6173.38
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Edward King
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Carter Printing Company	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 23 / 2015
Mailing Address 1739 East Grand Ave	Amount 2887.05
City Des Moines State IA Zip Code 50316	Transaction ID : SE.5684 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2015
Purpose of Expenditure Printing - door hangers	Category/Type 004
Name of Federal Candidate RAND PAUL	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 985596.31	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Carter Printing Company	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2015
Mailing Address 1739 East Grand Ave	Amount 2887.05
City Des Moines State IA Zip Code 50316	Transaction ID : SE.5703 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2015
Purpose of Expenditure Printing - door hangers	Category/Type 004
Name of Federal Candidate RAND PAUL	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1124242.55	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5774.10
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DOBIS, LLC
Mailing Address: 2603 Clear Cove
City: Austin, State: TX, Zip Code: 78704
Purpose of Expenditure: Video production
Category/Type: 004
Date of Public Distribution/Dissemination: 01/02/2016
Amount: 30000.00
Transaction ID: SE.5771
Date of Disbursement or Obligation: 11/23/2015
Name of Federal Candidate: RAND PAUL
Support: [X]
Office Sought: [X] President
State: IA
Disbursement For: [X] Primary
Calendar Year-To-Date Per Election for Office Sought: 1257910.03

Full Name of Payee: DOBIS, LLC
Mailing Address: 2603 Clear Cove
City: Austin, State: TX, Zip Code: 78704
Purpose of Expenditure: Video production
Category/Type: 004
Date of Public Distribution/Dissemination: 01/04/2016
Amount: 30000.00
Transaction ID: SE.5794
Date of Disbursement or Obligation: 11/23/2015
Name of Federal Candidate: RAND PAUL
Support: [X]
Office Sought: [X] President
State: NV
Disbursement For: [X] Primary
Calendar Year-To-Date Per Election for Office Sought: 84959.66

(a) SUBTOTAL of Itemized Independent Expenditures: 60000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature: Edward King
[Electronically Filed]
Date: 01/31/2016

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5771

First of three payments for video production for a series of independent expenditures.

Form/Schedule: SE

Transaction ID: SE.5794

First of three payments for video production for a series of independent expenditures.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5795

First of three payments for video production for a series of independent expenditures.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 251 N University Ave	Amount 278.17
City Provo State UT Zip Code 84601	Transaction ID : SE.5756 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Ad buy Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1294181.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 251 N University Ave	Amount 37.48
City Provo State UT Zip Code 84601	Transaction ID : SE.5757 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Ad buy Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1294219.11	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	315.65
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2016
Mailing Address 251 N University Ave	Amount 1317.20
City Provo State UT Zip Code 84601	Transaction ID : SE.5759 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Ad buy Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1295536.31	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 02 / 2016
Mailing Address 251 N University Ave	Amount 4365.74
City Provo State UT Zip Code 84601	Transaction ID : SE.5760 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Ad buy Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1299902.05	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5682.94
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 23 / 2016
Mailing Address 251 N University Ave	Amount 160000.00
City Provo State UT Zip Code 84601	Transaction ID : SE.5809 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Estimated pre-paid ad buy budget for month before primary	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 386109.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 09 / 2016
Mailing Address 251 N University Ave	Amount 170000.00
City Provo State UT Zip Code 84601	Transaction ID : SE.5810 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Estimated pre-paid ad buy budget for month before primary	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 200000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	330000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Harmon Brothers, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016
Mailing Address 251 N University Ave	Amount 163401.84
City Provo State UT Zip Code 84601	Transaction ID : SE.5823 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2015
Purpose of Expenditure Estimated remaining pre-paid ad buy budget for month before primary	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 1463303.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016

Full Name of Payee i360	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2015
Mailing Address PO Box 37046	Amount 8369.43
City Baltimore State MD Zip Code 21297	Transaction ID : SE.5322 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2015
Purpose of Expenditure July Outbound Phone Fees	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought 510374.68	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	171771.27
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed]

Date **01 / 31 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00525899 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee i360		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 15 / 2015	
Mailing Address PO Box 37046		Amount 2500.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SE.5324
Purpose of Expenditure Voter Data and Outreach Capability		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 15 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 512874.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee i360		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 06 / 2015	
Mailing Address PO Box 37046		Amount 0.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SE.5654
Purpose of Expenditure Voter Data and Outreach Capability		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 06 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 744815.09		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

Edward King

Signature _____ [Electronically Filed] Date **01 / 31 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters		FEC IDENTIFICATION NUMBER ▼ C C00525899	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee i360		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 06 / 2015	
Mailing Address PO Box 37046		Amount 0.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SE.5655
Purpose of Expenditure August Monthly Outbound Phone Fees		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 06 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 744815.09		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee i360		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2015	
Mailing Address PO Box 37046		Amount 2500.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SE.5675
Purpose of Expenditure Voter Data and Outreach Capability		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 859216.45		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	_____
(c) TOTAL Independent Expenditures..... ▶	_____

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

Edward King
Signature

[Electronically Filed]

Date **01 / 31 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee i360
Mailing Address PO Box 37046
City Baltimore State MD Zip Code 21297
Purpose of Expenditure Predictive dialer minutes Category/Type 004
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 861013.56
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee i360
Mailing Address PO Box 37046
City Baltimore State MD Zip Code 21297
Purpose of Expenditure Voter file and contact tools Category/Type 001
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 988096.31
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4297.11
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Edward King
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee i360	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2015
Mailing Address PO Box 37046	Amount 502.01
City Baltimore State MD Zip Code 21297	Transaction ID : SE.5686 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2015
Purpose of Expenditure Predictive dialer minutes Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 988598.32	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee i360	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37046	Amount 2500.00
City Baltimore State MD Zip Code 21297	Transaction ID : SE.5701 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Purpose of Expenditure Voter file and contact tools Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1220852.53	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3002.01
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee i360	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37046	Amount 1206.21
City Baltimore State MD Zip Code 21297	Transaction ID : SE.5702 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Purpose of Expenditure Predictive dialer minutes Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1222058.74	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee i360	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2015
Mailing Address PO Box 37046	Amount 2500.00
City Baltimore State MD Zip Code 21297	Transaction ID : SE.5740 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2015
Purpose of Expenditure Voter file and contact tools Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 224109.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3706.21
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee i360
Mailing Address PO Box 37046
City Baltimore State MD Zip Code 21297
Purpose of Expenditure Voter file and contact tools Category/Type 004
Date of Public Distribution/Dissemination 12/10/2015
Amount 2000.00
Transaction ID: SE.5741
Date of Disbursement or Obligation 12/10/2015
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 226109.79
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee i360
Mailing Address PO Box 37046
City Baltimore State MD Zip Code 21297
Purpose of Expenditure Voter file and contact tools Category/Type 004
Date of Public Distribution/Dissemination 12/10/2015
Amount 2500.00
Transaction ID: SE.5766
Date of Disbursement or Obligation 12/10/2015
Name of Federal Candidate RAND PAUL Support Oppose
Office Sought: President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1289660.16
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Edward King
[Electronically Filed]
Date 01/31/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee i360	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 10 / 2015
Mailing Address PO Box 37046	Amount 3643.73
City State Zip Code Baltimore MD 21297	Transaction ID : SE.5767 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2015
Purpose of Expenditure Predictive dialer minutes	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 1293303.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PDQ Printing of Las Vegas	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Mailing Address 3820 S Valley View Blvd	Amount 2693.26
City State Zip Code Las Vegas NV 89103	Transaction ID : SE.5708 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2015
Purpose of Expenditure Printing - door hangers	Category/Type 004
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 2693.26	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6336.99
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee PDQ Printing of Las Vegas	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2015
Mailing Address 3820 S Valley View Blvd	Amount 2820.22
City Las Vegas State NV Zip Code 89103	Transaction ID : SE.5744 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2015
Purpose of Expenditure Printing - door hangers Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 388930.01	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 03 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 170499.11
City Alexandria State VA Zip Code 22314	Transaction ID : SE.5312 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 03 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management Category/Type 004	Name of Federal Candidate RAND PAUL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 427142.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	173319.33
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[Empty Box]
(c) TOTAL Independent Expenditures..... ▶	[Empty Box]

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

Edward King [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
004

Date of Public Distribution/Dissemination
07 / 15 / 2015
Amount
74863.22
Transaction ID : SE.5315
Date of Disbursement or Obligation
07 / 15 / 2015

Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
502005.25

House District: 00
Senate State: IA
General
Other (specify)

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
001

Date of Public Distribution/Dissemination
07 / 22 / 2015
Amount
27174.35
Transaction ID : SE.5455
Date of Disbursement or Obligation
07 / 22 / 2015

Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
542423.21

House District:
Senate State: IA
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 102037.57
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Edward King
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
001
Date of Public Distribution/Dissemination
08 / 06 / 2015
Amount
202391.88
Transaction ID : SE.5651
Date of Disbursement or Obligation
08 / 06 / 2015
Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
744815.09

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
001
Date of Public Distribution/Dissemination
08 / 18 / 2015
Amount
108102.16
Transaction ID : SE.5663
Date of Disbursement or Obligation
08 / 18 / 2015
Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
852917.25

(a) SUBTOTAL of Itemized Independent Expenditures..... 310494.04
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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

Edward King
[Electronically Filed]
Date
01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00525899 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Voter Contact Services, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2015	
Mailing Address 107 S. West St, PMB 501		Amount 121695.70	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5677
Purpose of Expenditure Voter contact - field staff, technology, and data management		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 09 / 21 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		982709.26	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Voter Contact Services, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2015	
Mailing Address 107 S. West St, PMB 501		Amount 126491.70	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5687
Purpose of Expenditure Voter contact - field staff, technology, and data management		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 13 / 2015
Name of Federal Candidate RAND PAUL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		1115090.02	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	248187.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King

Signature _____ [Electronically Filed] Date **01 / 31 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 6265.48
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5696 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management	Category/Type 001
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 1121355.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 94109.98
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5692 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management	Category/Type 001
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 1218352.53	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	100375.46
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 5851.29
City Alexandria State VA Zip Code 22314	Transaction ID : SE.5699 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management	Category/Type 001
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought 1227910.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 52266.40
City Alexandria State VA Zip Code 22314	Transaction ID : SE.5700 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management	Category/Type 001
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 54959.66	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	58117.69
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Edward King [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Concerned American Voters
FEC IDENTIFICATION NUMBER
C C00525899
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
001
Date of Public Distribution/Dissemination
12 / 01 / 2015
Amount
136650.13
Transaction ID : SE.5715
Date of Disbursement or Obligation
12 / 01 / 2015
Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
State: NV
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
221609.79

Full Name of Payee
Voter Contact Services, LLC
Mailing Address
107 S. West St, PMB 501
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Voter contact - field staff, technology, and data management
Category/Type
001
Date of Public Distribution/Dissemination
12 / 01 / 2015
Amount
29250.13
Transaction ID : SE.5718
Date of Disbursement or Obligation
12 / 01 / 2015
Name of Federal Candidate
RAND PAUL
Support
Office Sought:
President
State: IA
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
1287160.16

(a) SUBTOTAL of Itemized Independent Expenditures..... 165900.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Edward King
[Electronically Filed]
Date
01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Concerned American Voters	FEC IDENTIFICATION NUMBER ▼ C C00525899
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Voter Contact Services, LLC	Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 25 / 2015
Mailing Address 107 S. West St, PMB 501	Amount 179071.88
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5737 Date of Disbursement or Obligation MM / DD / YYYY 12 / 28 / 2015
Purpose of Expenditure Voter contact - field staff, technology, and data management	Category/Type 001
Name of Federal Candidate RAND PAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 568001.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	179071.88
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1974662.86

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

Edward King
Signature

[Electronically Filed] Date **01 / 31 / 2016**