

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

CITIZEN SUPER PAC

ADDRESS (number and street) ▼

PO BOX 341028

☐ Check if different than previously reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00569517

3. IS THIS
REPORTNEW
(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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 LUKE MCALPIN

Signature of Treasurer

LUKE MCALPIN

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CITIZEN SUPER PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y Y 2016</div>		<div>229904.93</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>285476.14</div>	
(c) Total Receipts (from Line 19)	<div>12.00</div>	<div>793802.04</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>285488.14</div>	<div>1023706.97</div>
7. Total Disbursements (from Line 31).....	<div>78885.83</div>	<div>817104.66</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>206602.31</div>	<div>206602.31</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>371115.57</div>	



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)

Page 3

Write or Type Committee Name

CITIZEN SUPER PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

664000.00

(ii) Unitemized

12.00

12.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

12.00

664012.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

129790.04

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

12.00

793802.04

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

12.00

793802.04

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

12.00

793802.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	136.94	160513.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	136.94	160513.94
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)	78748.89	490696.42
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	165894.30
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)) ..	78885.83	817104.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78885.83	817104.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12.00	793802.04
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12.00	793802.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	136.94	160513.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	136.94	160513.94

<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

NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

A. WELLS FARGO BANK NA

Date of Disbursement

Transaction ID : SB21B.4630

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period



30.00

 Memo Item

B. WELLS FARGO BANK NA

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4631

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Memo Item

C. WELLS FARGO BANK NA

Date of Disbursement

Transaction ID : SB21B.4632

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

30.00

 Memo Item

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



90.00

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

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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<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

NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

A. WELLS FARGO BANK NA

Date of Disbursement

Transaction ID : SB21B.4661

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Category	Number of people
Number of people who did not go to the cinema	16.00

 Memo Item

B. WELLS FARGO BANK NA

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4662

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Memo Item

C.

Date of Disbursement

City	State	Zip Code
------	-------	----------

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

 Memo Item

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

Country	Percentage
United States	46.00
Germany	45.00
France	44.00
Italy	43.00
Spain	42.00
United Kingdom	41.00
Canada	40.00
Sweden	39.00
Denmark	38.00
Netherlands	37.00
Belgium	36.00
Austria	35.00
Switzerland	34.00
Portugal	33.00
Poland	32.00
Czech Republic	31.00
Slovakia	30.00
Hungary	29.00
Slovenia	28.00
Croatia	27.00
Bulgaria	26.00
Romania	25.00
Greece	24.00
Turkey	23.00
India	22.00
China	21.00
Japan	20.00
South Korea	19.00
Israel	18.00
Ukraine	17.00
Belarus	16.00
Latvia	15.00
Lithuania	14.00
Malta	13.00
Maldives	12.00
Trinidad and Tobago	11.00
Barbados	10.00
Suriname	9.00
Guatemala	8.00
El Salvador	7.00
Honduras	6.00
Nicaragua	5.00
Costa Rica	4.00
Panama	3.00
Dominican Republic	2.00
Venezuela	1.00
Paraguay	0.00

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

Age group	Number of people
0-14	100
15-24	120
25-34	130
35-44	136
45-54	136
55-64	136
65-74	136
75-84	136
85+	136

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 8 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

2212.50

Transaction ID : SD10.4120

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2212.50

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

140.00

Transaction ID : SD10.4121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

687.50

Transaction ID : SD10.4122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

687.50

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

3040.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

180.00

Transaction ID : SD10.4123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

580.00

Transaction ID : SD10.4124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

580.00

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

80.00

Transaction ID : SD10.4125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

80.00

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

840.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

3817.50

Transaction ID : SD10.4172

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3817.50

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

8270.50

Transaction ID : SD10.4223

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8270.50

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

6272.50

Transaction ID : SD10.4258

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6272.50

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

18360.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

127.50

Transaction ID : SD10.4259

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

127.50

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

2150.00

Transaction ID : SD10.4315

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2150.00

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State Zip Code
Austin TX 78734

Outstanding Balance Beginning This Period

127.50

Transaction ID : SD10.4331

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

127.50

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

2405.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

Gober Hilgers PLLC

Nature of Debt (Purpose):

Legal and Compliance Services

Mailing Address PO Box 341016

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

211.56

Transaction ID : SD10.4382

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.56

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

RightSide Compliance

Nature of Debt (Purpose):

Compliance Services

Mailing Address PO Box 341027

City State

Austin

Zip Code

TX

78734

Outstanding Balance Beginning This Period

5179.50

Transaction ID : SD10.4176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5179.50

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

RightSide Compliance

Nature of Debt (Purpose):

Compliance Services

Mailing Address PO Box 341027

City

Austin

State

TX

Zip Code

78734

Outstanding Balance Beginning This Period

1470.00

Transaction ID : SD10.4255

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1470.00

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

6861.06

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

2992.50

Transaction ID : SD10.4276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2992.50

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

3342.50

Transaction ID : SD10.4314

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3342.50

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State Zip Code
Austin TX 78734

Outstanding Balance Beginning This Period

1155.00

Transaction ID : SD10.4330

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1155.00

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

7490.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

332.50

Transaction ID : SD10.4368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

332.50

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

4964.33

Transaction ID : SD10.4637

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4964.33

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

RightSide ComplianceNature of Debt (Purpose):
Compliance Services

Mailing Address PO Box 341027

City State Zip Code
Austin TX 78734

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4663

Amount Incurred This Period

16247.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

16247.19

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

21544.02

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

2062.69

Transaction ID : SD10.4441

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2062.69

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

The Gober GroupNature of Debt (Purpose):
Legal Services

Mailing Address PO Box 341016

City State
AustinZip Code
TX 78734

Outstanding Balance Beginning This Period

9651.00

Transaction ID : SD10.4638

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9651.00

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

The Yates CompanyNature of Debt (Purpose):
Non-Federal Mailer Slate Card Printing

Mailing Address PO Box 75190

City State Zip Code
Houston TX 77234

Outstanding Balance Beginning This Period

788.50

Transaction ID : SD10.4580

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

788.50

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

12502.19

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
CITIZEN SUPER PAC

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

The Yates CompanyNature of Debt (Purpose):
Administrative Printing

Mailing Address PO Box 75190

City State

Zip Code

Houston

TX

77234

Outstanding Balance Beginning This Period

1072.80

Transaction ID : SD10.4587

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1072.80

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

Tusk DigitalNature of Debt (Purpose):
Website Development and Design

Mailing Address 718 7th St NW

2nd Floor

City State

Zip Code

Washington

DC

20001

Outstanding Balance Beginning This Period

297000.00

Transaction ID : SD10.4139

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

297000.00

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)..... ►

298072.80

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

371115.57

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) ►

371115.57

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 24
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00569517</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 <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee P+R Productions			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03 / 01 / 2016</div>	
Mailing Address 9109 Hilldale St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2141.67</div>	
City Houston		State TX	Zip Code 77055	
Purpose of Expenditure Federal Video Ad Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AR</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee P+R Productions			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03 / 01 / 2016</div>	
Mailing Address 9109 Hilldale St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2141.66</div>	
City Houston		State TX	Zip Code 77055	
Purpose of Expenditure Federal Video Ad Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block; float: right;">4283.33</div>				
(b) SUBTOTAL of Unitemized Independent Expenditures ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block; float: right;"></div>				
(c) TOTAL Independent Expenditures..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block; float: right;"></div>				
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 LUKE MCALPIN			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 20 / 2016</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 24
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC			FEC IDENTIFICATION NUMBER ▼ C C00569517	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee P+R Productions			<input type="checkbox"/> Memo Item	
Mailing Address 9109 Hilldale St			Date of Public Distribution/Dissemination 03 / 01 / 2016	
City Houston		State TX	Zip Code 77055	Amount 2141.67
Purpose of Expenditure Federal Video Ad Production		Category/Type 		Transaction ID : SE.4603 Date of Disbursement or Obligation 03 / 01 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<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: MN
Calendar Year-To-Date Per Election for Office Sought			2141.67 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee P+R Productions			<input type="checkbox"/> Memo Item	
Mailing Address 9109 Hilldale St			Date of Public Distribution/Dissemination 03 / 01 / 2016	
City Houston		State TX	Zip Code 77055	Amount 2141.67
Purpose of Expenditure Federal Video Ad Production		Category/Type 		Transaction ID : SE.4604 Date of Disbursement or Obligation 03 / 01 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<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: OK
Calendar Year-To-Date Per Election for Office Sought			2141.67 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			4283.34	
(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.				
LUKE MCALPIN			[Electronically Filed]	
Signature			Date 04 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00569517 </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 P+R Productions	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 03 / 04 / 2016 </div>		
Mailing Address 9109 Hilldale St		Amount <div style="border: 1px solid black; padding: 2px;"> 2141.66 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City Houston</td> <td style="width:33%;">State TX</td> <td style="width:33%;">Zip Code 77055</td> </tr> </table>			City Houston	State TX
City Houston	State TX	Zip Code 77055		
Purpose of Expenditure Federal Video Ad Production	Category/ Type	Transaction ID : SE.4605 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 03 / 01 / 2016 </div>		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: ID		
<div style="border: 1px solid black; padding: 2px;"> 2141.66 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee P+R Productions	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 03 / 04 / 2016 </div>		
Mailing Address 9109 Hilldale St		Amount <div style="border: 1px solid black; padding: 2px;"> 2141.67 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City Houston</td> <td style="width:33%;">State TX</td> <td style="width:33%;">Zip Code 77055</td> </tr> </table>			City Houston	State TX
City Houston	State TX	Zip Code 77055		
Purpose of Expenditure Federal Video Ad Production	Category/ Type	Transaction ID : SE.4606 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 03 / 01 / 2016 </div>		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
<div style="border: 1px solid black; padding: 2px;"> 2141.67 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 4283.33 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> </div>

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.

LUKE MCALPIN

[Electronically Filed]

Date

MM / DD / YYYY
 04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 20 OF 24
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00569517</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 <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>					
Full Name of Payee Prevail Strategies			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
Mailing Address 7309A Colina Vista Loop			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City Austin		State TX	Zip Code 78750		Transaction ID : SE.4633
Purpose of Expenditure Federal Ad Mailer Production, Printing and Postage			Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
Name of Federal Candidate JUSTIN FAREED			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Tusk Digital			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
Mailing Address 718 7th St NW 2nd Floor			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.4608
Purpose of Expenditure Federal Digital Ads Space and Ad Management			Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: ID		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
(c) TOTAL Independent Expenditures..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
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 LUKE MCALPIN			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 21 OF 24
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC			FEC IDENTIFICATION NUMBER ▼ C C00569517	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee Tusk Digital			<input type="checkbox"/> Memo Item	
Mailing Address 718 7th St NW 2nd Floor			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 04 / 2016	
City Washington		State DC	Zip Code 20001	
Purpose of Expenditure Federal Digital Ads Space and Ad Management		Category/Type 	Amount 9708.52	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI			District: _____	
Calendar Year-To-Date Per Election for Office Sought 11850.19			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Tusk Digital			<input type="checkbox"/> Memo Item	
Mailing Address 718 7th St NW 2nd Floor			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 01 / 2016	
City Washington		State DC	Zip Code 20001	
Purpose of Expenditure Federal Digital Video Ads Management		Category/Type 	Amount 2638.24	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AR			District: _____	
Calendar Year-To-Date Per Election for Office Sought 4779.91			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			12346.76	
(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.				
LUKE MCALPIN			[Electronically Filed]	
Signature			Date MM / DD / YYYY 04 / 20 / 2016	

Full Name of Payee Tusk Digital		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>03 / 01 / 2016</div> </div>	
Mailing Address 718 7th St NW 2nd Floor		Amount <div> <div></div> <div>2638.24</div> </div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.4614 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>03 / 03 / 2016</div> </div>	
Purpose of Expenditure Federal Digital Video Ads Management		Category/ Type		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ State: <u> MN </u>	
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>4779.91</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	5276.48
(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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZEN SUPER PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00569517 </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 MM / DD / YYYY		

Full Name of Payee <input type="checkbox"/> Memo Item Tusk Digital		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 01 / 2016 </div>	
Mailing Address 718 7th St NW 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2638.24</div>	
City Washington State DC Zip Code 20001	Transaction ID : SE.4615 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 03 / 2016 </div>		
Purpose of Expenditure Federal Digital Video Ads Management	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose RAFAEL EDWARD 'TED' CRUZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4779.91</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input type="checkbox"/> Memo Item Tusk Digital		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 14 / 2016 </div>	
Mailing Address 718 7th St NW 2nd Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12000.00</div>	
City Washington State DC Zip Code 20001	Transaction ID : SE.4652 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 15 / 2016 </div>		
Purpose of Expenditure Digital Ad Production and Media Buy	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose DONALD J TRUMP	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">12000.00</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">14638.24</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">78748.89</div>

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.

LUKE MCALPIN

[Electronically Filed]

Date

MM / DD / YYYY
04 / 20 / 2016

Signature

: 97 'A -G7 9 @ @ B9CI G'H9LH'F9 @ H98 'HC '5 'F9DCFHŽG7 <98I @ 'CF 'H9A -N5 HCB
.

Form/Schedule: SE

Transaction ID : SE.4652

Ads were disseminated in states where presidential primaries/caucuses had taken place as of 3/14/2016. Therefore, IE cost is designated to G2016 and reported in the aggregate in compliance with the thresholds set by 11 CFR 104.4(b)(2) and (f).

Form/Schedule:

Transaction ID: