February 25, 2016

To: Federal Elections Commission Independent Expenditures Division

At the end of January 2016, I called your office to inquire as to what course of action was necessary to record expenses incurred on a one time Grassroots Rally for a Presidential Candidate in advance of the Florida Presidential Preference GOP Primary on March 15, 2016. We are a group of independent citizen volunteers and are not connected with the official Campaign.

The gentleman asked me some details of the planned event and then told me we would need to file an Independent Expenditure Form. I asked him to send me the required documents for completion. The forms are completed and enclosed herewith.

The Independent Expenditures were incurred by three (3) separate individuals. The rally was held on Saturday, February 20, 2016 at Quaker Steak and Lube in Clearwater, Florida. All details and copies of receipts are enclosed.

Should you require any further information you may contact me at 727-374-7883.

Thank You, Mrs. John Burgess 120 Park Street N St. Petersburg, FL 33710

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

10 be used by reisons (other than rollical committees)	2016 FEB 29 AM 11: 34
1. (a) Name of Individual, Organization or Corporation	010 LED 52 AU 11 - 24
VERNON VERIGAN	
(b) Address (number and street) check if different than previously reported	
10630-95 57-N	
(c) City, State and ZIP Code	
SEMINOCE, FC	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)) C
CONSULTANT - SAFE GUARD ENTERPRISES	
4. TYPE OF REPORT (check appropriate boxes):	
(a) "V April 15 Overtocky Papart	
(a) \overline{X} April 15 Quarterly Report	
July 15 Quarterly Report 24-Hour Report	
October 15 Quarterly Report 48-Hour Report	
January 31 Year-End Report	
b) Is this Report an amendment? X No Yes, it amends the report filed on	$ \vec{k}-\vec{k} \leq \vec{k}-\vec{k} \leq \vec{k}-\vec{k} \leq \vec{k}-\vec{k} \leq \vec{k}-\vec{k} $
	• • •
5. COVERING PERIOD: FROM 02 02 2016	
THROUGH 02 20 2016	
111100011 0 E 20 L0 1 b	
·	
6. TOTAL CONTRIBUTIONS	•
7. TOTAL INDEPENDENT EXPENDITURES	
TO THE HOLF ENDENT EXTENSION OF THE STATE OF	816.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultatio	n, or concert with, or at the request or
suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
	~
VERNON VERIGAN Jen N	2-24-2016
NOTE: Submission of talse, erroneous or incomplete information may subject the person signing this report to the	ne penalties of 52 U.S.C. § 30109.

SCHEDULE 5-A ITEMIZED RECEIPTS

NAME OF FILER (In Full)	
Full Name (Last, First, Middle Initial)	
Mailing Address	Date of Receipt
	M M / D D / Y Y Y Y
City State Zip Code	
FEC ID number of contribution	Amount of Each Receipt this Period
FEC ID number of confributing federal political committee	7
Name of Employer Occup	pation
Full Name (Last, First, Middle Initiat)	/
Moiling Address	Date of Receipt
Mailing Address	M M , D D , I Y - Y Y . Y .
City State Zip Code	
FFC ID sumber of east-thuties	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	to the state of the state of the
Name of Employer Occup	
Full Name (Last, First, Middle Initial)	
	Date of Receipt
Mailing Address	м.м. / "б"_"б / У У У У
City State Zip Code	- consist and a final design of the constant o
EEC ID number of contribution	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	F 70 70 70 70 70 70 70 70 70 70 70 70 70
Name of Employer Oocup	pation
Full Name (Last, First, Middle Initial)	
Mailing Address	Date of Receipt
City State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	Amount of Laci necept this refloo
federal political committee.	
Name of Employer Occup	pation

SCHEDULE 5-E	250			PAGE OF FOR LINE 7 OF FORM 5
TEMIZED INDEPENDENT EXPENDITUR	RES			FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)				
VERNON VERIGAN				
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
C+D PRINTING				
Mailing Address				02 09 2016
12150-28 ST. N.				Amount
City	State	Zip Code		8:10
8T. PENE	FL	33716		, ,816.00
Purpose of Expenditure		Category/	Offi	ce Sought: House State:
YARD SIGNS		Туре		Senate District:
Name of Federal Candidate Supported or Opp	osed by Expend	liture:	-	President District:
TED CRUZ	, ,		Chi	eck One: X Support Oppose
120 CRUZ			Diel	
Calendar Year-To-Date Per Election for Office Sought		2016	Disi	Other (specify)
				Other (Specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
}				and the property to be the
Mailing Address				·.
				Amount
City	State	Zip Code		
				5 5
Purpose of Expenditure		Category/	Off	ice Sought: House State:
		Туре		Senate District:
Name of Federal Candidate Supported or Opp	osed by Expend	liture:		President
			Ch	eck One: Support Oppose
Calendar Year-To-Date Per Election			Dis	bursement For: Primary General
for Office Sought				Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
, , , , , , , , , , , , , , , , , , , ,				M 4 5 B C / Y "
Mailing Address			<u>_</u>	
, maining yield esse				Amount
City	State	Zip Code		Amount
Only	State	Zip Code		j 1 2
Purpose of Expenditure	······································	1	000	
Purpose of Experiantie		Category/ Type	Om	ce Sought: House State:
Name of Federal Candidate Supported or Opp	nosed by Evnend		_	Senate District:
Tame of the second of the seco	LAPENU		Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought			Disi	bursement For: Primary General
io. Cinac coagn		·		Other (specify)
(a) SUBTOTAL of Itemized Independent Expen	ditures			
C. C. T. C. T. C. T. C. T. C. T. C.			······ þ	e e
(b) SUBTOTAL of Unitemized Independent Exp	enditures			
(-) COLITION OF MORNING MUCHONICENT EXP				; · · · · · · ·
(c) TOTAL Independent Expenditures				~ 11 -
(carry total from last page forward to L				, 81600



INVOICE NO:

553

INVOICE DATE:

02/09/16

CUSTOMER NO:

070

INVOICE

SALES REP NO:

05

BILL TO:

SHIP TO:

SAFE GUARD ENTERPRISE 10630 95TH STREET NORTH SEMINOLE FL 33777

CUSTOMER PO: TERMS: COD PAYMENT DUE: 02/09/16

QTY. ORDERED DESCRIPTION AMOUNT

333 YARD SIGNS & STAKES

747.66

Parder full 2/9/16

SUBTOTAL:

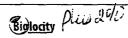
SALES TAX: ADVANCE PMT: 747.66 52.34

TOTAL DUE:

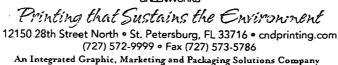
800.00

:AZURA











Retail

US POSTAGE PAID

\$3.34

Origin: 33704 Destination: 20463

1000

182540704-18

USPS FIRST-CLASS MAIL®

USPS TRACKING NUMBER



DEAL LIETOU!

ME STREET N.

WASHINGTO D.C. 2046

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
Hand Delivered	Date of Receipt			
USPS First Class Mail 2/25/16	Date of Receipt 2/29/16			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
USPS Priority Mail Express	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Business Day Delivery				
Received from House Records & Registration Of	Date of Receipt ffice			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
	2/29/16			
(3/2015)	DATE PREPARED			
· ,				