

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Rebuilding America Now

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="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="571209.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="17959917.00"/>	<input type="text" value="20120367.00"/>
(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="18531126.96"/>	<input type="text" value="20120367.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15493868.82"/>	<input type="text" value="17083108.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3037258.14"/>	<input type="text" value="3037258.14"/>
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="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Rebuilding America Now

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).....	17803075.00	19963075.00
(ii) Unitemized	23600.00	24050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17826675.00	19987125.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	50000.00	50000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17876675.00	20037125.00
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).....	83242.00	83242.00
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)).....▶	17959917.00	20120367.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17959917.00	20120367.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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	1617306.57	1775043.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1617306.57	1775043.61
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)	13876562.25	15308065.25
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	15493868.82	17083108.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15493868.82	17083108.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	17876675.00	20037125.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17876675.00	20037125.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1617306.57	1775043.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	83242.00	83242.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1534064.57	1691801.61

**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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BELL, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 958 HICKORY AVE

City DEPERE	State WI	Zip Code 54115-3016
----------------	-------------	------------------------

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

Name of Employer (for Individual) BELMARK INC	Occupation (for Individual) CHAIRMAN/FOUNDER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2016

Transaction ID : SA11A.30

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HAVERLY, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 ALISO ST

City VENTURA	State CA	Zip Code 93001-2103
-----------------	-------------	------------------------

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

Name of Employer (for Individual) HAVERLY SYSTEM INC	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.33

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. JR ACQUISITION, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3228 SUMMIT SQUARE PL
STE 180

City LEXINGTON	State KY	Zip Code 40509
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 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
07		13		2016

Transaction ID : SA11A.36

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100750.00
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 7 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MARCUS, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 W PACES FERRY RD
 STE 615
 City ATLANTA State GA Zip Code 30327-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000000.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.63
 Amount of Each Receipt this Period 3000000.00
 Memo Item CONTRIBUTION

B. OSBORNE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10530 HUSSEY LANE
 City CARMEL State IN Zip Code 46032-7921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL CONTRACTING, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.43
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. PRESTRIDGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27000 N ALMA SCHOOL PKWY
 City SCOTTSDALE State AZ Zip Code 85262-8350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.49
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3005500.00
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 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BUCK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3198 GARDENIA DR.
 City HERNANDO BEACH State FL Zip Code 34607-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERT L BUCK ESQ., P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 07 / 24 / 2016
Transaction ID : SA11A.51
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

B. HAMILTON COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4970 ENERGY WAY
 City RENO State NV Zip Code 89502-4123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.64
 Amount of Each Receipt this Period 300000.00
 Memo Item
 CONTRIBUTION

C. BEASLEY, THOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 DOVE ROAD
 City JONESBORO State AR Zip Code 72401-5270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENCY MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.60
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300255.00
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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. ASBELL, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3318 WINDSOR RD. SW
 City ROANOKE State VA Zip Code 24018-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.87
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BAIN, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 N OCEAN DR.
 City HOLLYWOOD State FL Zip Code 33019-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALVOTECH Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.99
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BUCK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3198 GARDENIA DR.
 City HERNANDO BEACH State FL Zip Code 34607-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERT L BUCK ESQ., P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.73
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BUTTERWORTH, LYNNE AND KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 VILLAGE LANE
 City HAVERHILL State MA Zip Code 01832-1177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANVER CORP Occupation (for Individual) VP OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.161
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. COOK, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 POLPIS ROAD
 City MOORESVILLE State NC Zip Code 28117-6605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE FIRE PROTECTION, LLC Occupation (for Individual) ENTREPRENUER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.105
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. DELFIUM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PANORAMA
 City COTO DE CAZA State CA Zip Code 92679-5362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.78
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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:	PAGE 11 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. DUPREE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 KNIPP RD
 City HOUSTON State TX Zip Code 77024-5023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.117
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ELLIOTT, BEVERLY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1477
 City MOUNT JULIET State TN Zip Code 37121-1477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.74
 Amount of Each Receipt this Period
 450000.00
 Memo Item
 CONTRIBUTION

C. HILL, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1896 MUDDY CREEK CIR
 City LOVELAND State CO Zip Code 80538-7277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.162
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450500.00
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:	PAGE 12 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. INSOFT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8069 13TH AVENUE SOUTH
 City ST PETERSBURG State FL Zip Code 33707-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ORTHODONTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.106
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. JONSSON, JAN ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3349 NE 30TH AVENUE
 City LIGHTHOUSE POINT State FL Zip Code 33064-8526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HARNESS RACING TRAINER/DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.119
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. LOVLEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 S FEDERAL HWY #1
 City LAKE WORTH State FL Zip Code 33460-7106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.109
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
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 13 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 513 CHARLOTTE STREET
 City FREDERICKSBURG State VA Zip Code 22401-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.84
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. MENDIOLA JR., RUBEN A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 566300
 City MIAMI State FL Zip Code 33256-6300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEALERNFA, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.76
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. SCROGGIE, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 N RIVERSIDE DRIVE
 City MELBOURNE State FL Zip Code 32937-4834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.148
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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:	PAGE 14 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. STEINBORN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 S WASHINGTON CIR
 City HINSDALE State IL Zip Code 60521-4532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIG Occupation (for Individual) TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.75
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. WINKLER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8418 PETERS RD
 City FREDERICK State MD Zip Code 21704-8107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O Occupation (for Individual) O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.92
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. ARZENTE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31831 PASEO CIELO
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.167
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6500.00
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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. GALBRAITH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 WEST MOUNTAIN RD.
 City WEST SIMSBURY State CT Zip Code 06092-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONNECTICUT MAXILLOFACIAL SURGEONS, LL Occupation (for Individual) ORAL AND MAXILLOFACIAL SURGEON
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.188
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAVERLY, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ALISO ST
 City VENTURA State CA Zip Code 93001-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAVERLY SYSTEM INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.194
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HELVEY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 842 EAST VILLA STREET
 City PASADENA State CA Zip Code 91101-1259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 270.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.182
 Amount of Each Receipt this Period 270.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 770.00
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 16 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. SMITH, BOYD, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 COLERIDGE AVE
 City PALO ALTO State CA Zip Code 94301-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WSJ PROPERTIES Occupation (for Individual) REAL ESTATE INVESTMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275000.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.226
 Amount of Each Receipt this Period 200000.00
 Memo Item CONTRIBUTION

B. WALCOTT, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2820 GREENBRIAR BLVD
 City WELLINGTON State FL Zip Code 33414-7156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.193
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BROWN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7509 FLAGSTONE STREET
 City FORT WORTH State TX Zip Code 76118-6953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPELLON, INC Occupation (for Individual) ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.209
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 203500.00
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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. FRANK CALANDRA, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 KAPPA DR
 City PITTSBURGH State PA Zip Code 15238-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.208
 Amount of Each Receipt this Period 150000.00
 Memo Item
CONTRIBUTION

B. TARTAGLIA, GINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 SUNNY RIDGE RD
 City MOHEGAN LAKE State NY Zip Code 10547-1432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.219
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. CASTANON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 CLARENDON BLVD, APT 1214
 City ARLINGTON State VA Zip Code 22201-3342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED CO-INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.221
 Amount of Each Receipt this Period 300.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150550.00
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: PAGE 18 OF 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. SNYDER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4512 3RD ST CIR W #318
 City BRADENTON State FL Zip Code 34207-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.237
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WHORTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1816 CARMEL DRIVE
 City PLANO State TX Zip Code 75075-7305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STIFEL Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.235
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DEUTMEYER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8315 CHESHIRE VALE ST.
 City HOUSTON State TX Zip Code 77024-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.246
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
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 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. HAVERLY, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ALISO ST
 City VENTURA State CA Zip Code 93001-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAVERLY SYSTEM INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.249
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCMAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.254
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

C. SADLER, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 LAKE MATTIE ROAD
 City AUBURNDALE State FL Zip Code 33823-9489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANNY SADLER, INC. Occupation (for Individual) HOME BUILDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.248
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1002750.00
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 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. LAVANTURE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 10
 City BRISTOL State IN Zip Code 46507-0010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.258
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROBBINS, LYNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 873 BANCROFT PLACE
 City THE VILLAGES State FL Zip Code 32162-3700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOWLES SYSTEMS, INC Occupation (for Individual) FOUNDER/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.261
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HULME, GEOFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 MOUNTAIN LAUREL DRIVE
 City GREENWICH State CT Zip Code 06831-2741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.262
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
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 21 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MCGAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.383
 Amount of Each Receipt this Period 2000000.00
 Memo Item CONTRIBUTION

B. JOHNSON, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF AMERICA Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.273
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCGAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.295
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000250.00
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:	PAGE 22 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MCNECE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1830
 City DAVIS State CA Zip Code 95617-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVISVILLE PROPERTIES, INC. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.283
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. ROGERS, NORMAN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3750 S LAS VEGAS BLVD
 City LAS VEGAS State NV Zip Code 89158-4312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.291
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. SCARAMUCCI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 MADISON AVENUE FLOOR 16
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKYBRIDGE CAPITAL Occupation (for Individual) CO-MANAGING PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.294
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	102000.00
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 23 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. ZIEVE, PETER, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10517 62ND PL W
 City MUKILTEO State WA Zip Code 98275-4639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTROIMPACT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.287
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

B. CAMERON, RONALD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 EAST 4TH STREET
 City NORTH LITTLE ROCK State AR Zip Code 72114-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.305
 Amount of Each Receipt this Period 2000000.00
 Memo Item
 CONTRIBUTION

C. FRANK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HILLTOP ROAD
 City NORWALK State CT Zip Code 06854-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEA DRAGON Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.298
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050100.00
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: PAGE 24 OF 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. HICKS, WILLIAM, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2732 HARVEST DR
 City SARASOTA State FL Zip Code 34240-8222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GATORGAP INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.324
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KURZ, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 TROY RD RD
 City ROCHESTER State NY Zip Code 14618-2945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.308
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PUZDER, ANDREW, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6303 CARPINTERIA AVE
 City CARPINTERIA State CA Zip Code 93013-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CKE RESTAURANTS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.336
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 11000.00
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:	PAGE 25 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Rebuilding America Now

A. ZIEVE, PETER, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10517 62ND PL W
 City MUKILTEO State WA Zip Code 98275-4639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTROIMPACT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.311
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. AJAX PAVING INDUSTRIES OF FLORIDA LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AJAX DR
 City NORTH VENICE State FL Zip Code 34275-3505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.329
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW

C. HORAN, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AJAX DR
 City NORTH VENICE State FL Zip Code 34275-3505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AJAX PAVING INDUSTRIES OF FLORIDA LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.334
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55000.00
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 26 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. CONDOTTE AMERICA INC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10790 NW 127TH ST
 City MEDLEY State FL Zip Code 33178-3197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.326
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. HUBBARD CONSTRUCTION COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 LEE RD SUITE 300
 City WINTER PARK State FL Zip Code 32789-7202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.333
 Amount of Each Receipt this Period
 25000.00
 Memo Item
CONTRIBUTION

C. JOHNSON-DAVIS INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 HILLBRATH DR
 City LANTANA State FL Zip Code 33462-1656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.327
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27000.00
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 27 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. PALM BEACH AGGREGATES LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20125 FL-80
PO BOX 700

City LOXAHATCHEE State FL Zip Code 33470-0700

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.331

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

B. SUPERIOR CONSTRUCTION COMPANY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7072 BUSINESS PARK BLVD N

City JACKSONVILLE State FL Zip Code 32256-2749

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.328

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

C. THE DE MOYA GROUP INC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14600 SW 136TH ST

City MIAMI State FL Zip Code 33186-6762

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.330

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	34000.00
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 28 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. VECCELIO GROUP INC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 SANSBURY WAY

City WEST PALM BEACH	State FL	Zip Code 33411-3670
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11A.332

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. WEEKLEY ASPHALT PAVING INC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20701 STIRLING RD

City PEMBROOK PINES	State FL	Zip Code 33332-1513
------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11A.325

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. NUTTALL, BRENDA, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 FIELDSTONE COURT

City NORTH HAVEN	State CT	Zip Code 06473-2891
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016

Transaction ID : SA11A.320

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26250.00
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 29 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MCMAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.344
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

B. BROWN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7509 FLAGSTONE STREET
 City FORT WORTH State TX Zip Code 76118-6953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPELLON, INC Occupation (for Individual) ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.343
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GOLDBLATT, SIDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2
 City JOHNSTOWN State PA Zip Code 15907-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S. GOLDBLATT PATHOLOGY Occupation (for Individual) PHYSICAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.351
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1001250.00
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 30 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. HAYS, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7935
 City CLINTON State LA Zip Code 70722-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.346
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANDERSON COLUMBIA CO INC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 871 NW GUERDON ST
 City LAKE CITY State FL Zip Code 32055-4346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.345
 Amount of Each Receipt this Period 150000.00
 Memo Item CONTRIBUTION

C. JENCKS, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 HIDDEN VALLEY COURT
 City FISHERSVILLE State VA Zip Code 22939-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.358
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150500.00
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 31 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. DUNBAR, UNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3820 COLES POINT WAY
 City GLEN ALLEN State VA Zip Code 23060-7230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.369
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LAMAN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 E PLANT ST SUITE F
 City WINTER GARDEN State FL Zip Code 34787-2922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCLUSIVE AGENCY INC. Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MARTIN, JO, SLOAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 560
 City MILFORD State IA Zip Code 51351-0560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.367
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20750.00
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 32 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. FRANK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HILLTOP ROAD
 City NORWALK State CT Zip Code 06854-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEA DRAGON Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.380
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. ZIEVE, PETER, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10517 62ND PL W
 City MUKILTEO State WA Zip Code 98275-4639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTROIMPACT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.379
 Amount of Each Receipt this Period 400000.00
 Memo Item
CONTRIBUTION

C. AGRO-INDUSTRIAL MANAGEMENT INC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 N CLEMATIS ST STE 200
 City WEST PALM BEACH State FL Zip Code 33401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.394
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425100.00
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 33 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. AMERICAS EXPORT CORPORATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 SW 3RD AVE
STE 600

City MIAMI State FL Zip Code 33129

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.390

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. GEO CORRECTIONS HOLDINGS INC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 621 NW 53RD ST, STE 700

City BOCA RATON State FL Zip Code 33487-8242

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.378

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

C. GLC FARMS INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 N CLEMATIS ST
STE 200

City WEST PALM BEACH State FL Zip Code 33401

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.392

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150000.00
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 34 OF 169
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. OKEELANTA CORPORATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21250 U. S. HWY 27

City SOUTH BAY	State FL	Zip Code 33493
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016

Transaction ID : SA11A.393

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. STOFIN CO., INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 N CLEMATIS ST
STE 200

City WEST PALM BEACH	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016

Transaction ID : SA11A.391

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. GOLDBLATT, SIDNEY, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1243 LAUREL VIEW DR.

City JOHNSTOWN	State PA	Zip Code 15905-1509
-------------------	-------------	------------------------

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

Name of Employer (for Individual) GOLDBLATT SYSTEMS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016

Transaction ID : SA11A.388

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55000.00
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 35 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MAXWELL, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12502 ROSELAND ROAD
 City SEBASTIAN State FL Zip Code 32958-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.402
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCCUNE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6587 SADDLE TRAIL ANDERSON CA UNIT
 City ANDERSON State CA Zip Code 96007-9513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.401
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DIERCKSEN HOLDINGS INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1239 CAMBRIA BEND
 City KISSIMMEE State FL Zip Code 34759-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.398
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 36 OF 169
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BUCKLEY, WALTER, W., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 BETHLEHEM PLAZA

City BEHTLEHEM	State PA	Zip Code 18018-5754
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BUCKLEY MUETHING CAPITAL MGMT. CO.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.416

Amount of Each Receipt this Period
500000.00

Memo Item
CONTRIBUTION

B. CUMMINS, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 PLEASANT RIDGE ROAD

City HARRISON	State NY	Zip Code 10528-1233
------------------	-------------	------------------------

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

Name of Employer (for Individual) PRIME	Occupation (for Individual) BUSINESS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.412

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. FRANK, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 HILLTOP ROAD

City NORWALK	State CT	Zip Code 06854-5002
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SEA DRAGON	Occupation (for Individual) FINANCE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.421

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	501100.00
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 37 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. JOHNSON, BENJAMIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4

City PITTSFORD	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BANK OF AMERICA	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.425

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ROSENTHAL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4444 W RIVERSIDE DR.
STE 303

City BURBANK	State CA	Zip Code 91505-4073
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.427

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. WEAVER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 FISHER CREEK DRIVE

City RIDGWAY	State CO	Zip Code 81432-8951
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NA	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.431

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25350.00
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 38 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. ZIEVE, PETER, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10517 62ND PL W
 City MUKILTEO State WA Zip Code 98275-4639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTROIMPACT Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.434
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

B. HACKMEYER, F. WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5055 W. COUNTY HWY. 30A, UNIT 1015
 City SANTA ROSA BEACH State FL Zip Code 32459-4373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HACKMEYER PROPERTIES Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.440
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DISALVO, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 OLD ALBANY POST RD
 City GARRISON State NY Zip Code 10524-3416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARSONS-DISALVO AGENCY INC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.445
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500750.00
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 39 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. GOBLE, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 26

City MCLEOD	State MT	Zip Code 59052-0026
----------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.444

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. MOYER, KYLE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10925 N 78TH

City SCOTTSDALE	State AZ	Zip Code 85260-5585
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.448

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. HAVERLY, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ALISO ST

City VENTURA	State CA	Zip Code 93001-2103
-----------------	-------------	------------------------

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

Name of Employer (for Individual) HAVERLY SYSTEM INC	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 09 / 01 / 2016
Transaction ID : SA11A.450

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65250.00
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:	PAGE 40 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. SILLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 COCOANUT ROW
 City PALM BEACH State FL Zip Code 33480-4069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EDUCATOR/SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.449
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. GOLDBLATT, SIDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2
 City JOHNSTOWN State PA Zip Code 15907-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S. GOLDBLATT PATHOLOGY Occupation (for Individual) PHYSICAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.453
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COOPER, E., MARLENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 ARABIAN DR
 City PARKERSBURG State WV Zip Code 26104-8637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.458
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15250.00
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 41 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MARCUS, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 W PACES FERRY RD
 STE 615
 City ATLANTA State GA Zip Code 30327-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.459
 Amount of Each Receipt this Period 2000000.00
 Memo Item CONTRIBUTION

B. DIERCKSEN HOLDINGS INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1239 CAMBRIA BEND
 City KISSIMMEE State FL Zip Code 34759-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.457
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. XLR8, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3060 PEACHTREE RD NW
 STE 380
 City ATLANTA State GA Zip Code 30305-2594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.464
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2026000.00
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 42 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BOWEN III, HAROLD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 WOODWARD WAY
 City ATLANTA State GA Zip Code 30305-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWEN, HANES & COMPANY INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.462
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. GASTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6146 WYCLIFFE CIRCLE
 City RENO State NV Zip Code 89519-7346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.461
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KEVORKIAN, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 PLYMOUTH AVENUE
 City SWAMPSCOTT State MA Zip Code 01907-1121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN HANCOCK Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.465
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
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: PAGE 43 OF 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BROWN, ALISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4407 HANOVER AVE
 City RICHMOND State VA Zip Code 23221-1819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2016
Transaction ID : SA11A.467
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BOWEN III, HAROLD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 WOODWARD WAY
 City ATLANTA State GA Zip Code 30305-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWEN, HANES & COMPANY INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.471
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. CARPENTER, CHARLES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4232 EMMETT RD
 City MOBILE State AL Zip Code 36619-9732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2600.00
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 44 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. MOYER, KYLE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10925 N 78TH
 City SCOTTSDALE State AZ Zip Code 85260-5585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.475
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. OPPERMAN, JULIE, CHRYSTYN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10554 DOLCEDO WAY
 City LOS ANGELES State CA Zip Code 90077-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) PHILANTHROPY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.474
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. JOLLY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9459 APPLETON COURT
 City BRENTWOOD State TN Zip Code 37027-8677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOLLY ROOFING CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.479
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	76000.00
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:	PAGE 45 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. LEEN2S, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 HIAWATHA DR. NE
 City ALBUQUERQUE State NM Zip Code 87112-4632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.496
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LERNER, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3435 PICKERING LANE
 City PEARLAND State TX Zip Code 77584-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIMARY ARMS, LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.477
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PRINCIPE, ALDONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 ISLA BAHIA TER
 City FORT LAUDERDALE State FL Zip Code 33316-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WIFE/MOTHER Occupation (for Individual) WIFE/MOTHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.478
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 46 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. LUNDEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 658
 City CONNELL State WA Zip Code 99326-0658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.501
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WUTKE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6666 ODANA RD STE 215
 City MADISON State WI Zip Code 53719-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.500
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. VOYADGIS, NICHOLAS E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 MEADOWLARK DRIVE
 City TRYON State NC Zip Code 28782-2516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.503
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
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 47 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. BROWN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7509 FLAGSTONE STREET
 City FORT WORTH State TX Zip Code 76118-6953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPELLON, INC Occupation (for Individual) ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.511
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BUCKLEY, WALTER, W., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BETHLEHEM PLAZA
 City BEHTLEHEM State PA Zip Code 18018-5754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCKLEY MUETHING CAPITAL MGMT. CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.573
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

C. FLAHERTY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 U.S. 206
 City ROXBURY TOWNSHIP State NJ Zip Code 07836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KCKJ EAST Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.518
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	501250.00
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 48 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. RANGOS, JOHN, G., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 OSPREY POINT CIR
 City BOCA RATON State FL Zip Code 33431-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.520
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. WUTKE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6666 ODANA RD STE 215
 City MADISON State WI Zip Code 53719-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.519
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCOTT, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13203 PALMERS CREEK TERRACE
 City LAKEWOOD RANCH State FL Zip Code 34202-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE CORP Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.522
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25750.00
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 49 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. SMITH, BOYD, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 COLERIDGE AVE
 City PALO ALTO State CA Zip Code 94301-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WSJ PROPERTIES Occupation (for Individual) REAL ESTATE INVESTMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.524
 Amount of Each Receipt this Period 75000.00
 Memo Item CONTRIBUTION

B. HUDSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6655 WESTGATE DR.
 City BEAUMONT State TX Zip Code 77706-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASON CONSTRUCTION, LTD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.526
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. MCMAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901-2216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.530
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1077500.00
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 51 OF 169
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. WUTKE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6666 ODANA RD STE 215
 City MADISON State WI Zip Code 53719-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.537
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ECCLESTONE, E., LLWYD, , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3267
 City WEST PALM BEACH State FL Zip Code 33402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.538
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. FEINBERG, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 E 67TH ST
 City NEW YORK State NY Zip Code 10065-6120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CERBERUS CAPITAL MANAGEMENT LP Occupation (for Individual) INVESTMENT ADVISER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.539
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600250.00
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:	PAGE 52 OF 169
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. GRAY, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2550
 City HOBBS State NM Zip Code 88241-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.540
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. MCMURREY, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address NP 74 LAKE CHEROKEE
 City LONGVIEW State TX Zip Code 75603-9701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.541
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HOPKINS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3687 TRASKWOOD CIRCLE
 City CINCINNATI State OH Zip Code 45208-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMPSON HINE LLP Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.544
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11250.00
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: PAGE 54 OF 169
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. THE GEO GROUP INC PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PARK PL, SUITE 70
 621 NORTHWEST 53RD ST
 City BOCA RATON State FL Zip Code 33487-8235
 FEC ID number of contributing federal political committee. **C** C00382150
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11C.335
 Amount of Each Receipt this Period
 50000.00
 Memo Item
CONTRIBUTION

B.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
TOTAL This Period (last page this line number only).....▶	50000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 169
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rebuilding America Now

A. COLD HARBOR FILMS LTD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
83242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2016

Transaction ID : SA15.256

Amount of Each Receipt this Period
83242.00

Memo Item
REFUND OF EXCESS PAYMENT

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	83242.00
TOTAL This Period (last page this line number only).....	83242.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I139
Amount of Each Disbursement this Period
 504.00
MERCHANT PROCESSING FEES
 Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I138
Amount of Each Disbursement this Period
 2.71
MERCHANT PROCESSING FEES
 Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I73
Amount of Each Disbursement this Period
 500.00
Memo Item

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

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

1006.71

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 001

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : **SB21B.I70**
Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 001

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : **SB21B.I71**
Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 001

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : **SB21B.I74**
Amount of Each Disbursement this Period: 3.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 63.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. EDNEXUS ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		12		2016

Mailing Address 2126 CONNECTICUT AVENUE NW
UNIT #27

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
FINANCE CONSULTING

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.I203
Amount of Each Disbursement this Period
20000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		12		2016

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.I75
Amount of Each Disbursement this Period
30.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		12		2016

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21B.I76
Amount of Each Disbursement this Period
30.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Memo Item

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

20060.00

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. HALE WESTFALL, LLP		Date of Disbursement MM / DD / YYYY 07 / 14 / 2016
Mailing Address 1600 STOUT STREET SUITE 500		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I132
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement LEGAL CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 16625.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> RYAN R. CALL - LEGAL AND FEC COMPLIANCE
State: District:		

Full Name (Last, First, Middle Initial) B. GAY, LAURANCE, W., MR.,		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 143 E. CANAAN ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I104
City CANAAN	State CT	Zip Code 06024
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 5613.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> REIMBURSEMENT - TRAVEL EXPENSES
State: District:		

Full Name (Last, First, Middle Initial) C. GAY, LAURANCE, W., MR.,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 143 E. CANAAN ROAD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I131
City CANAAN	State CT	Zip Code 06024
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 972.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/> TRAVEL EXPENSES - MILEAGE REIMBURSEMENT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	22238.21
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 05 / 31 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I123
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1028.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAVEL EXPENSES - AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 06 / 05 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I126
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 225.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAVEL EXPENSES - AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I130
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 590.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAVEL EXPENSES - AIRFARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. SOUTHWEST AIRLINES CO.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2016

Mailing Address P.O. BOX 36611

City DALLAS State TX Zip Code 75235-1611

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I112**
Amount of Each Disbursement this Period

[REDACTED] 517.98

TRAVEL EXPENSES - AIRFARE

Memo Item

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
B. SOUTHWEST AIRLINES CO.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2016

Mailing Address P.O. BOX 36611

City DALLAS State TX Zip Code 75235-1611

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I113**
Amount of Each Disbursement this Period

[REDACTED] 8.00

TRAVEL EXPENSES - IN-FLIGHT
WI-FI

Memo Item

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
C. THE LANGHAM HUNTINGTON HOTEL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2016

Mailing Address 1401 S. OAK KNOLL AVENUE

City PASADENA State CA Zip Code 91106

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.I127**
Amount of Each Disbursement this Period

[REDACTED] 525.53

TRAVEL EXPENSES - HOTEL
LODGING

Memo Item

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

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

[REDACTED] 0.00

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

[REDACTED]

**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"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		08		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I105
Amount of Each Disbursement this Period

Candidate Name

44.51

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		08		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I106
Amount of Each Disbursement this Period

Candidate Name

44.72

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		10		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I107
Amount of Each Disbursement this Period

Candidate Name

51.47

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

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

0.00

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Date of Disbursement: 05 / 13 / 2016

Mailing Address: 1455 MARKET STREET, SUITE 400
City: SAN FRANCISCO, State: CA, Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Office Sought: House, Senate, President
Disbursement For: 2016
 Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID: SB21B.I108
Amount of Each Disbursement this Period: 52.06
TRAVEL EXPENSES - CAR FARE
 Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Date of Disbursement: 05 / 13 / 2016

Mailing Address: 1455 MARKET STREET, SUITE 400
City: SAN FRANCISCO, State: CA, Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Office Sought: House, Senate, President
Disbursement For: 2016
 Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID: SB21B.I109
Amount of Each Disbursement this Period: 73.24
TRAVEL EXPENSES - CAR FARE
 Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Date of Disbursement: 05 / 13 / 2016

Mailing Address: 1455 MARKET STREET, SUITE 400
City: SAN FRANCISCO, State: CA, Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Office Sought: House, Senate, President
Disbursement For: 2016
 Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID: SB21B.I110
Amount of Each Disbursement this Period: 100.19
TRAVEL EXPENSES - CAR FARE
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		16		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I114
Amount of Each Disbursement this Period

Candidate Name

44.83

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		16		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I115
Amount of Each Disbursement this Period

Candidate Name

47.90

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
05		20		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRAVEL

002
Category/ Type

C

Transaction ID : SB21B.I117
Amount of Each Disbursement this Period

Candidate Name

105.25

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

TRAVEL EXPENSES - CAR FARE
 Memo Item

State: District:

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

0.00

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Category/Type: 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 05 / 21 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I118
Amount of Each Disbursement this Period: 104.50
TRAVEL EXPENSES - CAR FARE
 Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Category/Type: 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 05 / 25 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I119
Amount of Each Disbursement this Period: 108.67
TRAVEL EXPENSES - CAR FARE
 Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400

City: SAN FRANCISCO State: CA Zip Code: 94103

Purpose of Disbursement: TRAVEL
Candidate Name: _____
Category/Type: 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 05 / 25 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I120
Amount of Each Disbursement this Period: 128.52
TRAVEL EXPENSES - CAR FARE
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I121

Amount of Each Disbursement this Period: 231.51

TRAVEL EXPENSES - CAR FARE

Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I122

Amount of Each Disbursement this Period: 233.02

TRAVEL EXPENSES - CAR FARE

Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I124

Amount of Each Disbursement this Period: 15.18

TRAVEL EXPENSES - CAR FARE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I125
Amount of Each Disbursement this Period: 33.63
TRAVEL EXPENSES - CAR FARE
 Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I128
Amount of Each Disbursement this Period: 111.88
TRAVEL EXPENSES - CAR FARE
 Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 08 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I129
Amount of Each Disbursement this Period: 127.22
TRAVEL EXPENSES - CAR FARE
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. GAY, LAURANCE, W., MR.,		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 143 E. CANAAN ROAD		FEC Identification Number C [REDACTED]
City CANAAN	State CT	Zip Code 06024
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Transaction ID : SB21B.I141
Candidate Name		Amount of Each Disbursement this Period 35000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> POLITICAL CONSULTING SERVICES RENDERED
State: District:		

Full Name (Last, First, Middle Initial) B. MCKAY, KENNETH, K., MR., IV		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 18 ARMINGTON AVENUE		FEC Identification Number C [REDACTED]
City NORTH KINGSTOWN	State RI	Zip Code 02852
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Transaction ID : SB21B.I142
Candidate Name		Amount of Each Disbursement this Period 35000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> POLITICAL CONSULTING SERVICES RENDERED
State: District:		

Full Name (Last, First, Middle Initial) C. MCKAY, KENNETH, K., MR., IV		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 18 ARMINGTON AVENUE		FEC Identification Number C [REDACTED]
City NORTH KINGSTOWN	State RI	Zip Code 02852
Purpose of Disbursement TRAVEL		Transaction ID : SB21B.I77
Candidate Name		Amount of Each Disbursement this Period 2051.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> EXPENSE REIMBURSEMENT - TRAVEL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	72051.84
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I87

Amount of Each Disbursement this Period

1	0	9	0	0
---	---	---	---	---

TRAVEL EXPENSE - TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I88

Amount of Each Disbursement this Period

1	5	1	0	0
---	---	---	---	---

TRAVEL EXPENSE - TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I90

Amount of Each Disbursement this Period

1	5	1	0	0
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TRAVEL - TRAIN FARE

Memo Item

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

0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 23 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I93

Amount of Each Disbursement this Period: 129.00

TRAVEL EXPENSES - TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)
B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I96

Amount of Each Disbursement this Period: 213.00

TRAVEL EXPENSES - TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)
C. LOEWS REGENCY HOTEL NEW YORK

Mailing Address 540 PARK AVENUE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I100

Amount of Each Disbursement this Period: 381.03

TRAVEL EXPENSES - HOTEL LODGING

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I101

Amount of Each Disbursement this Period: 23.16

TRAVEL EXPENSES - CAB FARE

Memo Item

B. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I103

Amount of Each Disbursement this Period: 7.56

TRAVEL EXPENSES - CAB FARE

Memo Item

C. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I85

Amount of Each Disbursement this Period: 23.16

TRAVEL EXPENSE - TAXI FARE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I86

Amount of Each Disbursement this Period

12.96

TRAVEL EXPENSE - TAXI FARE

Memo Item

Full Name (Last, First, Middle Initial)

B. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I91

Amount of Each Disbursement this Period

16.56

TRAVEL - CAB FARE

Memo Item

Full Name (Last, First, Middle Initial)

C. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I94

Amount of Each Disbursement this Period

26.76

TRAVEL EXPENSES - CAB FARE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I97

Amount of Each Disbursement this Period

18.36
TRAVEL EXPENSES - CAB FARE

Memo Item

Full Name (Last, First, Middle Initial)

B. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I98

Amount of Each Disbursement this Period

12.96
TRAVEL EXPENSES - CAB FARE

Memo Item

Full Name (Last, First, Middle Initial)

C. THE LOWELL HOTEL

Mailing Address 28 E. 63RD STREET

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
06 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I89

Amount of Each Disbursement this Period

607.93
TRAVEL EXPENSE - HOTEL LODGING

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I78

Amount of Each Disbursement this Period

UBER - TRANSPORTATION

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I146

Amount of Each Disbursement this Period

CMDI MERCHANT ACCOUNT SERVICE FEES

Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTION CFO, LLC

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I133

Amount of Each Disbursement this Period

FEC COMPLIANCE

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. FOLEY & LARDNER, LLP		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 3000 K STREET, NW SUITE 600		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I134
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement LEGAL CONSULTING		Amount of Each Disbursement this Period 28440.00
Candidate Name		MEMO ITEM LEGAL PROFESSIONAL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I143
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 30.00
Candidate Name		MEMO ITEM BANK FEE - WIRE TRANSFER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I144
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 30.00
Candidate Name		MEMO ITEM BANK FEE - WIRE TRANSFER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	28500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 18 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I147
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 15.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item BANK FEE - WIRE TRANSFER SERVICE CHARGE
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 19 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I148
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item BANK FEE - WIRE TRANSFER SERVICE CHARGE
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I176
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATA PROCESSING SERVICES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 10.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item ONLINE DONATION PROCESSING SOFTWARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016	
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I162	
City SAN FRANCISCO	State CA	Zip Code 94104	Amount of Each Disbursement this Period [REDACTED] 30.00
Purpose of Disbursement BANK FEE		Category/ Type 001	Memo Item <input type="checkbox"/> BANK FEE - WIRE TRANSFER FEE
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016	
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I163	
City SAN FRANCISCO	State CA	Zip Code 94104	Amount of Each Disbursement this Period [REDACTED] 30.00
Purpose of Disbursement BANK FEE		Category/ Type 001	Memo Item <input type="checkbox"/> BANK FEE - WIRE TRANSFER FEE
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016	
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I164	
City SAN FRANCISCO	State CA	Zip Code 94104	Amount of Each Disbursement this Period [REDACTED] 30.00
Purpose of Disbursement BANK FEE		Category/ Type 001	Memo Item <input type="checkbox"/> BANK FEE - WIRE TRANSFER FEE
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 90.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 25 / 2016

FEC Identification Number

Transaction ID : SB21B.I177
Amount of Each Disbursement this Period

Memo Item BANK FEE - WIRE TRANSFER FEE

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 25 / 2016

FEC Identification Number

Transaction ID : SB21B.I178
Amount of Each Disbursement this Period

Memo Item BANK FEE - WIRE TRANSFER FEE

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 25 / 2016

FEC Identification Number

Transaction ID : SB21B.I179
Amount of Each Disbursement this Period

Memo Item BANK FEE - WIRE TRANSFER FEE

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : **SB21B.I330**
Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : **SB21B.I331**
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : **SB21B.I332**
Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I333
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I334
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTION CFO, LLC

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I201
Amount of Each Disbursement this Period

FEC COMPLIANCE

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. HALE WESTFALL, LLP		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 1600 STOUT STREET SUITE 500		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I191
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement LEGAL CONSULTING		Amount of Each Disbursement this Period 16905.00
Candidate Name		Memo Item <input type="checkbox"/> RYAN R. CALL - LEGAL AND FEC COMPLIANCE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. NATIONAL MEDIA DIGITAL		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I193
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. NATIONAL MEDIA DIGITAL		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I194
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 5600.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	27505.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. NATIONAL MEDIA DIGITAL		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [] Transaction ID : SB21B.I195 Amount of Each Disbursement this Period 16000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ACE METRIX, INC.		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 1960 E. GRAND AVENUE, SUITE 510		FEC Identification Number C [] Transaction ID : SB21B.I196 Amount of Each Disbursement this Period 14000.00
City EL SEGUNDO	State CA	Zip Code 90245
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ACE METRIX, INC.		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 1960 E. GRAND AVENUE, SUITE 510		FEC Identification Number C [] Transaction ID : SB21B.I197 Amount of Each Disbursement this Period 2000.00
City EL SEGUNDO	State CA	Zip Code 90245
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	16000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN LLC		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED]
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		001 Category/Type
Candidate Name		Transaction ID : SB21B.I190 Amount of Each Disbursement this Period 150000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/> CONSULTING SERVICES RENDERED
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED]
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		001 Category/Type
Candidate Name		Transaction ID : SB21B.I335 Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 08 / 04 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED]
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		001 Category/Type
Candidate Name		Transaction ID : SB21B.I336 Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150045.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I337

Amount of Each Disbursement this Period

[REDACTED] 30.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 299052

City
FORT LAUDERDALE

State
FL

Zip Code
33329-9052

Purpose of Disbursement
BANK FEE

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I341

Amount of Each Disbursement this Period

[REDACTED] 166.06

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
BANK FEE

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I342

Amount of Each Disbursement this Period

[REDACTED] 836.55

Memo Item

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

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

[REDACTED] 1032.61

[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I338
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I339
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I340
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. EDNEXUS ADVISORS, LLC

Mailing Address 2126 CONNECTICUT AVENUE NW
UNIT #27

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
FINANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I204
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. EDNEXUS ADVISORS, LLC

Mailing Address 2126 CONNECTICUT AVENUE NW
UNIT #27

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
FINANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I205
Amount of Each Disbursement this Period

FUNDRAISING EXPENSE
REIMBURSEMENTS

Memo Item

Full Name (Last, First, Middle Initial)

C. NATIONAL MEDIA DIGITAL

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I207
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I343
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
B. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I344
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
08 / 08 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I345
Amount of Each Disbursement this Period: 30.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 09 / 2016

FEC Identification Number

Transaction ID : SB21B.I347
Amount of Each Disbursement this Period

FEC COMPLIANCE SOFTWARE
 Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 09 / 2016

FEC Identification Number

Transaction ID : SB21B.I346
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

Transaction ID : SB21B.I351
Amount of Each Disbursement this Period

RESEARCH SERVICES
 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I352

Amount of Each Disbursement this Period

15000.00

RESEARCH SUPPORT

Memo Item

Full Name (Last, First, Middle Initial)

B. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I353

Amount of Each Disbursement this Period

30000.00

RESEARCH SERVICES

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I354

Amount of Each Disbursement this Period

15000.00

RESEARCH SUPPORT

Memo Item

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

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

60000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I348

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I349

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I350

Amount of Each Disbursement this Period

30.00

Memo Item

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

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

90.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 11 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I599
Amount of Each Disbursement this Period
15.14

TAXI CAB FARE
 Memo Item

Full Name (Last, First, Middle Initial)

B. GAY, LAURANCE, W., MR.,

Mailing Address 143 E. CANAAN ROAD

City CANAAN State CT Zip Code 06024

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I415
Amount of Each Disbursement this Period
8512.22
EXPENSE REIMBURSEMENTS

Memo Item

Full Name (Last, First, Middle Initial)

C. GAY, LAURANCE, W., MR.,

Mailing Address 143 E. CANAAN ROAD

City CANAAN State CT Zip Code 06024

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I480
Amount of Each Disbursement this Period
486.00
MILEAGE - REIMBURSED AT IRS RATE
 Memo Item

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

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

8512.22

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. AT&T

Mailing Address 208 S. AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PHONE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I478

Amount of Each Disbursement this Period: 258.70

Memo Item

Full Name (Last, First, Middle Initial)
B. AT&T

Mailing Address 208 S. AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PHONE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I479

Amount of Each Disbursement this Period: 243.15

Memo Item

Full Name (Last, First, Middle Initial)
C. DELTA AIR LINES, INC.

Mailing Address 1030 DELTA BLVD.
DEPT. 680

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 16 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I467

Amount of Each Disbursement this Period: 595.10

AIRFARE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 07 / 16 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I468
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 1027.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I470
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 1294.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 07 / 27 / 2016
Mailing Address 1030 DELTA BLVD. DEPT. 680		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I475
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 595.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE <input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. IVY RESTAURANT		Date of Disbursement MM / DD / YYYY 07 / 03 / 2016
Mailing Address 113 N. ROBERTSON BLVD.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I460
City LOS ANGELES	State CA	Zip Code 90048
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 002	Amount of Each Disbursement this Period [REDACTED] 182.87
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. IVY RESTAURANT		Date of Disbursement MM / DD / YYYY 07 / 06 / 2016
Mailing Address 113 N. ROBERTSON BLVD.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I462
City LOS ANGELES	State CA	Zip Code 90048
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 002	Amount of Each Disbursement this Period [REDACTED] 102.02
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MORTON WILLIAMS		Date of Disbursement MM / DD / YYYY 07 / 27 / 2016
Mailing Address 1031 1ST AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I477
City NEW YORK	State NY	Zip Code 10022
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 002	Amount of Each Disbursement this Period [REDACTED] 157.58
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. THE LANGHAM HUNTINGTON HOTEL

Mailing Address 1401 S. OAK KNOLL AVENUE

City PASADENA

State CA

Zip Code 91106

Purpose of Disbursement
FOOD/BEVERAGE

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I473

Amount of Each Disbursement this Period

[REDACTED] 8.72

Memo Item

Full Name (Last, First, Middle Initial)

B. THE LANGHAM HUNTINGTON HOTEL

Mailing Address 1401 S. OAK KNOLL AVENUE

City PASADENA

State CA

Zip Code 91106

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I474

Amount of Each Disbursement this Period

[REDACTED] 2018.70
HOTEL LODGING

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO

State CA

Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	03	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I461

Amount of Each Disbursement this Period

[REDACTED] 82.58
CAR SERVICE

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

FEC Identification Number

Transaction ID : SB21B.I463
Amount of Each Disbursement this Period

CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

FEC Identification Number

Transaction ID : SB21B.I464
Amount of Each Disbursement this Period

CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

FEC Identification Number

Transaction ID : SB21B.I465
Amount of Each Disbursement this Period

CAR SERVICE

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
07		15		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C

Transaction ID : SB21B.I466
Amount of Each Disbursement this Period

Candidate Name

91.90

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

CAR SERVICE
 Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
07		22		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C

Transaction ID : SB21B.I471
Amount of Each Disbursement this Period

Candidate Name

135.76

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
07		27		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C

Transaction ID : SB21B.I476
Amount of Each Disbursement this Period

Candidate Name

135.64

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Memo Item

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

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

0.00

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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

A. WESTIN CLEVELAND

Full Name (Last, First, Middle Initial)
Mailing Address 777 SAINT CLAIR AVENUE NE

City CLEVELAND State OH Zip Code 44114

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I469
Amount of Each Disbursement this Period: 469.77
HOTEL LODGING
 Memo Item

B. WESTIN CLEVELAND

Full Name (Last, First, Middle Initial)
Mailing Address 777 SAINT CLAIR AVENUE NE

City CLEVELAND State OH Zip Code 44114

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I472
Amount of Each Disbursement this Period: 306.36
HOTEL LODGING
 Memo Item

C. GAY, LAURANCE, W., MR.,

Full Name (Last, First, Middle Initial)
Mailing Address 143 E. CANAAN ROAD

City CANAAN State CT Zip Code 06024

Purpose of Disbursement POLITICAL STRATEGY CONSULTING
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I416
Amount of Each Disbursement this Period: 35000.00
Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 35000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. MCKAY, KENNETH, K., MR., IV

Mailing Address 18 ARMINGTON AVENUE

City NORTH KINGSTOWN State RI Zip Code 02852

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

Transaction ID : SB21B.I413
Amount of Each Disbursement this Period

EXPENSE REIMBURSEMENTS
 Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

Transaction ID : SB21B.I552
Amount of Each Disbursement this Period

AIRFARE
 Memo Item

Full Name (Last, First, Middle Initial)
C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 21 / 2016

FEC Identification Number

Transaction ID : SB21B.I557
Amount of Each Disbursement this Period

AIRFARE
 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I566

Amount of Each Disbursement this Period

109.00

TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I574

Amount of Each Disbursement this Period

151.00

TRAIN FARE, CHANGE FEE

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I579

Amount of Each Disbursement this Period

151.00

TRAIN FARE

Memo Item

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I580

Amount of Each Disbursement this Period

1	5	1	0	0
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TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City
DALLAS

State
TX

Zip Code
75231

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I569

Amount of Each Disbursement this Period

1	1	3	2	.1
---	---	---	---	----

HOTEL LODGING IN NYC

Memo Item

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City
DALLAS

State
TX

Zip Code
75231

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I572

Amount of Each Disbursement this Period

4	3	8	.8	9
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HOTEL LODGING IN NYC

Memo Item

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

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

0	0	0
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 03 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I581
Amount of Each Disbursement this Period: 866.42
HOTEL LODGING
 Memo Item

Full Name (Last, First, Middle Initial)
B. LOEWS REGENCY HOTEL NEW YORK

Mailing Address 540 PARK AVENUE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement FOOD/BEVERAGE
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I573
Amount of Each Disbursement this Period: 84.59
 Memo Item

Full Name (Last, First, Middle Initial)
C. LOEWS REGENCY HOTEL NEW YORK

Mailing Address 540 PARK AVENUE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement TRAVEL
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I575
Amount of Each Disbursement this Period: 355.78
HOTEL LODGING
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I567
Amount of Each Disbursement this Period
11.76

TAXI FARE
 Memo Item

Full Name (Last, First, Middle Initial)

B. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I576
Amount of Each Disbursement this Period
15.35

TAXI FARE
 Memo Item

Full Name (Last, First, Middle Initial)

C. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 03 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I577
Amount of Each Disbursement this Period
25.56

TAXI FARE
 Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. PLAZA ATHENEE HOTEL		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016
Mailing Address 37 E. 64TH STREET		FEC Identification Number C [REDACTED]
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 002	Transaction ID : SB21B.I582
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 147.57
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WESTIN CLEVELAND		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address 777 SAINT CLAIR AVENUE NE		FEC Identification Number C [REDACTED]
City CLEVELAND	State OH	Zip Code 44114
Purpose of Disbursement TRAVEL	Category/ Type 002	Transaction ID : SB21B.I556
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 303.04 HOTEL LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WESTIN CLEVELAND		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 777 SAINT CLAIR AVENUE NE		FEC Identification Number C [REDACTED]
City CLEVELAND	State OH	Zip Code 44114
Purpose of Disbursement TRAVEL	Category/ Type 002	Transaction ID : SB21B.I559
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 630.53 HOTEL LODGING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

[REDACTED] 0.00
[REDACTED]

**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"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. FOLEY & LARDNER, LLP

Mailing Address 3000 K STREET, NW
SUITE 600

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
LEGAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I215

Amount of Each Disbursement this Period

[REDACTED] 28124.00

LEGAL SERVICES RENDERED

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I355

Amount of Each Disbursement this Period

[REDACTED] 30.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I356

Amount of Each Disbursement this Period

[REDACTED] 30.00

Memo Item

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

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

[REDACTED] 28184.00

[REDACTED]

**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"/> 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

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)
Rebuilding America Now

A. WELLS FARGO BANK, N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I357

Amount of Each Disbursement this Period: 30.00

Memo Item

B. WELLS FARGO BANK, N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I358

Amount of Each Disbursement this Period: 15.00

Memo Item

C. WELLS FARGO BANK, N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I359

Amount of Each Disbursement this Period: 30.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. ELECTION CFO, LLC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I216

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. CAVALRY STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 224 E. 6TH AVENUE

City TALLAHASSEE State FL Zip Code 32303

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I202

Amount of Each Disbursement this Period: 16000.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I365

Amount of Each Disbursement this Period: 157.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 18157.03

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement BANK FEE Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 19 / 2016

FEC Identification Number C

Transaction ID : SB21B.I366

Amount of Each Disbursement this Period 165.46

Memo Item

B. STICK AND RUDDER STRATEGIES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 705 MELVIN AVENUE #105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement POLITICAL STRATEGY CONSULTING Category/Type 005

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 19 / 2016

FEC Identification Number C

Transaction ID : SB21B.I217

Amount of Each Disbursement this Period 51210.00

Memo Item

C. WELLS FARGO BANK, N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement BANK FEE Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 19 / 2016

FEC Identification Number C

Transaction ID : SB21B.I360

Amount of Each Disbursement this Period 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 51390.46

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	19	/	2016

FEC Identification Number

C

Transaction ID : SB21B.I361

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	19	/	2016

FEC Identification Number

C

Transaction ID : SB21B.I362

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	19	/	2016

FEC Identification Number

C

Transaction ID : SB21B.I363

Amount of Each Disbursement this Period

15.00

Memo Item

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

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

45.00

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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 19 / 2016

FEC Identification Number

Transaction ID : SB21B.I364
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 23 / 2016

FEC Identification Number

Transaction ID : SB21B.I367
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 25 / 2016

FEC Identification Number

Transaction ID : SB21B.I368
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I369
Amount of Each Disbursement this Period
364.83

Memo Item

Full Name (Last, First, Middle Initial)

B. CAVALRY STRATEGIES LLC

Mailing Address 224 E. 6TH AVENUE

City TALLAHASSEE State FL Zip Code 32303

Purpose of Disbursement
FINANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I231
Amount of Each Disbursement this Period
16000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EDNEXUS ADVISORS, LLC

Mailing Address 2126 CONNECTICUT AVENUE NW
UNIT #27

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
FINANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I229
Amount of Each Disbursement this Period
21285.00

Memo Item

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

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

37649.83

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016
Mailing Address 233 SOUTH WACKER DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I325
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 25.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item AIRFARE BAGGAGE FEE
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016
Mailing Address 233 SOUTH WACKER DRIVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I326
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 664.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement MM / DD / YYYY 08 / 08 / 2016
Mailing Address 1 VERIZON WAY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I327
City BASKING RIDGE	State NJ	Zip Code 07920
Purpose of Disbursement PHONE EXPENSE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 168.51	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. ELECTION CFO, LLC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016
Mailing Address P.O. BOX 26141		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I230
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 6000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JIM MCLAUGHLIN & ASSOCIATES, INC.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016
Mailing Address 24 WESCOTT STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I232
City OLD TAPPAN	State NJ	Zip Code 07675
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 21000.00 POLLING AND RESEARCH
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL MEDIA DIGITAL		Date of Disbursement MM / DD / YYYY 09 / 01 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I233
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 5600.00 DIGITAL SERVICES AND WEBSITE HOSTING
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	32600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I377
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. HALE WESTFALL, LLP

Mailing Address 1600 STOUT STREET
SUITE 500

City DENVER State CO Zip Code 80202

Purpose of Disbursement
LEGAL CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I373
Amount of Each Disbursement this Period

RYAN R. CALL - LEGAL AND FEC COMPLIANCE

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B.I374
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I375

Amount of Each Disbursement this Period

[REDACTED] 15000.00

RESEARCH SUPPORT

Memo Item

Full Name (Last, First, Middle Initial)

B. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I376

Amount of Each Disbursement this Period

[REDACTED] 30000.00

RESEARCH

Memo Item

Full Name (Last, First, Middle Initial)

C. STICK AND RUDDER STRATEGIES, INC.

Mailing Address 705 MELVIN AVENUE #105

City
ANNAPOLIS

State
MD

Zip Code
21401

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

005

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I234

Amount of Each Disbursement this Period

[REDACTED] 21000.00

POLLING AND RESEARCH

Memo Item

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

[REDACTED] 66000.00

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

[REDACTED]

**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"/> 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

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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. STICK AND RUDDER STRATEGIES, INC.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address 705 MELVIN AVENUE #105		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I235
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period [REDACTED] 38275.00
Candidate Name		POLLING AND RESEARCH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. STICK AND RUDDER STRATEGIES, INC.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address 705 MELVIN AVENUE #105		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I236
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period [REDACTED] 80000.00
Candidate Name		RESEARCH AND POLITICAL CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I370
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [REDACTED] 30.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 118305.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I371
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I372
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address P.O. BOX 299052		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I379
City FORT LAUDERDALE	State FL	Zip Code 33329-9052
Purpose of Disbursement BANK FEE	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period 251.55	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	311.55
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
09 / 06 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 001

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I378
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
B. WELLS FARGO BANK, N.A.

Date of Disbursement: MM / DD / YYYY
09 / 07 / 2016

Mailing Address 420 MONTGOMERY

City: SAN FRANCISCO State: CA Zip Code: 94104

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 001

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I380
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CMDI

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2016

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: BANK FEE
Candidate Name: _____
Category/Type: 003

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: C
Transaction ID : SB21B.I382
Amount of Each Disbursement this Period: 83.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 113.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I381
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
BANK FEE

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I383
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I384
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I385

Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. GAY, LAURANCE, W., MR.,

Mailing Address 143 E. CANAAN ROAD

City CANAAN State CT Zip Code 06024

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I419

Amount of Each Disbursement this Period: 7212.20

EXPENSE REIMBURSEMENTS

Memo Item

Full Name (Last, First, Middle Initial)
C. GAY, LAURANCE, W., MR.,

Mailing Address 143 E. CANAAN ROAD

City CANAAN State CT Zip Code 06024

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I508

Amount of Each Disbursement this Period: 486.00

MILEAGE REIMBURSEMENT AT IRS RATE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7242.20

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 S. AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement
PHONE EXPENSE

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I507
Amount of Each Disbursement this Period
306.63

Memo Item

Full Name (Last, First, Middle Initial)

B. CLIFT HOTEL

Mailing Address 495 GEARY STREET

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I496
Amount of Each Disbursement this Period
1836.24
HOTEL LODGING

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES, INC.

Mailing Address 1030 DELTA BLVD.
DEPT. 680

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I482
Amount of Each Disbursement this Period
598.10
AIRFARE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. IL PASTAIO RISTORANTE

Mailing Address 400 N. CANON DRIVE

City BEVERLY HILLS State CA Zip Code 90210

Purpose of Disbursement
FOOD/BEVERAGE

001
 002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I505
Amount of Each Disbursement this Period
162.70

Memo Item

Full Name (Last, First, Middle Initial)
B. IL PASTAIO RISTORANTE

Mailing Address 400 N. CANON DRIVE

City BEVERLY HILLS State CA Zip Code 90210

Purpose of Disbursement
FOOD/BEVERAGE

001
 002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I506
Amount of Each Disbursement this Period
342.53

Memo Item

Full Name (Last, First, Middle Initial)
C. PLAZA ATHENEE HOTEL

Mailing Address 37 E. 64TH STREET

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement
TRAVEL

001
 002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I481
Amount of Each Disbursement this Period
1155.55
HOTEL LODGING

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES CO.

Mailing Address P.O. BOX 36611

City
DALLAS

State
TX

Zip Code
75235-1611

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I491

Amount of Each Disbursement this Period

475.96

AIRFARE

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES CO.

Mailing Address P.O. BOX 36611

City
DALLAS

State
TX

Zip Code
75235-1611

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I493

Amount of Each Disbursement this Period

15.00

AIRLINE CHARGE

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES CO.

Mailing Address P.O. BOX 36611

City
DALLAS

State
TX

Zip Code
75235-1611

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I494

Amount of Each Disbursement this Period

28.00

AIRFARE RELATED CHARGE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. THE LANGHAM HUNTINGTON HOTEL

Mailing Address 1401 S. OAK KNOLL AVENUE

City
PASADENA

State
CA

Zip Code
91106

Purpose of Disbursement
FOOD/BEVERAGE

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I500
Amount of Each Disbursement this Period
11.45

Memo Item

Full Name (Last, First, Middle Initial)

B. THE LANGHAM HUNTINGTON HOTEL

Mailing Address 1401 S. OAK KNOLL AVENUE

City
PASADENA

State
CA

Zip Code
91106

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I501
Amount of Each Disbursement this Period
432.87
HOTEL LODGING

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
TRANSPORTATION SVC

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I484
Amount of Each Disbursement this Period
131.60
CAR SERVICE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I485
Amount of Each Disbursement this Period
96.82

CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I486
Amount of Each Disbursement this Period
102.46

CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I487
Amount of Each Disbursement this Period
23.53

CAR SERVICE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

Transaction ID : SB21B.I488
Amount of Each Disbursement this Period

CAR SERVICE
 Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

Transaction ID : SB21B.I489
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2016

FEC Identification Number

Transaction ID : SB21B.I490
Amount of Each Disbursement this Period

CAR SERVICE
 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I492
Amount of Each Disbursement this Period
93.00
CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I495
Amount of Each Disbursement this Period
30.95
CAR SERVICE

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES INC.

Mailing Address 1455 MARKET STREET
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I497
Amount of Each Disbursement this Period
25.26
CAR SERVICE

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
08		22		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C
Transaction ID : SB21B.I498
Amount of Each Disbursement this Period
86.87
CAR SERVICE

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
08		22		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C
Transaction ID : SB21B.I499
Amount of Each Disbursement this Period
95.00
CAR SERVICE

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1455 MARKET STREET
SUITE 400

M M M	/	D D D	/	Y Y Y Y Y
08		27		2016

City SAN FRANCISCO State CA Zip Code 94103

FEC Identification Number

Purpose of Disbursement
TRANSPORTATION SVC

002
Category/ Type

C
Transaction ID : SB21B.I502
Amount of Each Disbursement this Period
106.76
CAR SERVICE

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: District:

Memo Item

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

0.00

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. MCKAY, KENNETH, K., MR., IV

Mailing Address 18 ARMINGTON AVENUE

City
NORTH KINGSTOWN

State
RI

Zip Code
02852

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I417

Amount of Each Disbursement this Period

[REDACTED] 3207.41

EXPENSE REIMBURSEMENTS

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I588

Amount of Each Disbursement this Period

[REDACTED] 111.00

TRAIN FARE

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City
WASHINGTON

State
DC

Zip Code
20002-4285

Purpose of Disbursement
TRAVEL

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I592

Amount of Each Disbursement this Period

[REDACTED] 131.00

TRAIN FARE

Memo Item

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

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

[REDACTED] 3207.41

[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement MM / DD / YYYY 08 / 11 / 2016
Mailing Address 60 MASSACHUSETTS AVENUE NE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I604
City WASHINGTON	State DC	Zip Code 20002-4285
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 87.00
Candidate Name		Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAIN FARE
State: District:		

Full Name (Last, First, Middle Initial) B. AMTRAK		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address 60 MASSACHUSETTS AVENUE NE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I616
City WASHINGTON	State DC	Zip Code 20002-4285
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 111.00
Candidate Name		Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAIN FARE
State: District:		

Full Name (Last, First, Middle Initial) C. AMTRAK		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address 60 MASSACHUSETTS AVENUE NE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I620
City WASHINGTON	State DC	Zip Code 20002-4285
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 151.00
Candidate Name		Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TRAIN FARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement TRAVEL
Candidate Name
Category/Type 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I591
Amount of Each Disbursement this Period
450.30

HOTEL LODGING IN NYC
 Memo Item

Full Name (Last, First, Middle Initial)

B. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement TRAVEL
Candidate Name
Category/Type 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 11 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I605
Amount of Each Disbursement this Period
515.71

HOTEL LODGING DC
 Memo Item

Full Name (Last, First, Middle Initial)

C. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement TRAVEL
Candidate Name
Category/Type 002

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I619
Amount of Each Disbursement this Period
404.33

HOTEL LODGING IN NYC
 Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 10440 N. CENTRAL EXPWY.
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement TRAVEL
Candidate Name
Category/Type **002**

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number
C
Transaction ID : **SB21B.I624**
Amount of Each Disbursement this Period
450.31

HOTEL LODGING NYC
 Memo Item

Full Name (Last, First, Middle Initial)

B. LOEWS REGENCY HOTEL NEW YORK

Mailing Address 540 PARK AVENUE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement FOOD/BEVERAGE
Candidate Name
Category/Type **002**

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number
C
Transaction ID : **SB21B.I594**
Amount of Each Disbursement this Period
5.36

Memo Item

Full Name (Last, First, Middle Initial)

C. NYC-TAXI CAB

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRANSPORTATION SVC
Candidate Name
Category/Type **002**

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number
C
Transaction ID : **SB21B.I583**
Amount of Each Disbursement this Period
12.36

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRANSPORTATION SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I586

Amount of Each Disbursement this Period: 40.38

TAXI CAB FARE

Memo Item

B. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRANSPORTATION SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I587

Amount of Each Disbursement this Period: 15.35

TAXI CAB FARE

Memo Item

C. NYC-TAXI CAB

Full Name (Last, First, Middle Initial)

Mailing Address 33 BEAVER STREET

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement TRANSPORTATION SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I595

Amount of Each Disbursement this Period: 17.88

TAXI CAB FARE

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. NYC-TAXI CAB		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address 33 BEAVER STREET		FEC Identification Number C [REDACTED]
City NEW YORK	State NY	Zip Code 10004
Purpose of Disbursement TRAVEL	Category/Type 002	Transaction ID : SB21B.I597
Candidate Name		Amount of Each Disbursement this Period 11.62
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TAXI CAB FARE
State: District:		

Full Name (Last, First, Middle Initial) B. NYC-TAXI CAB		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address 33 BEAVER STREET		FEC Identification Number C [REDACTED]
City NEW YORK	State NY	Zip Code 10004
Purpose of Disbursement TRANSPORTATION SVC	Category/Type 002	Transaction ID : SB21B.I598
Candidate Name		Amount of Each Disbursement this Period 9.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TAXI CAB FARE
State: District:		

Full Name (Last, First, Middle Initial) C. NYC-TAXI CAB		Date of Disbursement MM / DD / YYYY 08 / 11 / 2016
Mailing Address 33 BEAVER STREET		FEC Identification Number C [REDACTED]
City NEW YORK	State NY	Zip Code 10004
Purpose of Disbursement TRANSPORTATION SVC	Category/Type 002	Transaction ID : SB21B.I603
Candidate Name		Amount of Each Disbursement this Period 18.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item TAXI CAB FARE
State: District:		

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

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

0.00
[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. NYC-TAXI CAB		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address 33 BEAVER STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I618
City NEW YORK	State NY	Zip Code 10004
Purpose of Disbursement TRANSPORTATION SVC		Amount of Each Disbursement this Period 14.15
Candidate Name		TAXI CAB FARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. NYC-TAXI CAB		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address 33 BEAVER STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I623
City NEW YORK	State NY	Zip Code 10004
Purpose of Disbursement TRANSPORTATION SVC		Amount of Each Disbursement this Period 14.15
Candidate Name		TAXI CAB FARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. PLAZA ATHENEE HOTEL		Date of Disbursement MM / DD / YYYY 08 / 05 / 2016
Mailing Address 37 E. 64TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I585
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement FACILITY RENTAL		Amount of Each Disbursement this Period 147.57
Candidate Name		HOTEL MEETING ROOM EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. PLAZA ATHENEE HOTEL		Date of Disbursement MM / DD / YYYY 08 / 11 / 2016
Mailing Address 37 E. 64TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I602
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 11.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PLAZA ATHENEE HOTEL		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address 37 E. 64TH STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I622
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 43.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES INC.		Date of Disbursement MM / DD / YYYY 08 / 12 / 2016
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I609
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement TRANSPORTATION SVC	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 21.65 CAR SERVICE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

A. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400
SAN FRANCISCO CA 94103

Purpose of Disbursement: TRANSPORTATION SVC
Candidate Name: _____
Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: 08 / 12 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I611
Amount of Each Disbursement this Period: 40.40
CAR SERVICE
 Memo Item

B. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400
SAN FRANCISCO CA 94103

Purpose of Disbursement: TRANSPORTATION SVC
Candidate Name: _____
Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I612
Amount of Each Disbursement this Period: 38.19
CAR SERVICE
 Memo Item

C. UBER TECHNOLOGIES INC.

Full Name (Last, First, Middle Initial)
1455 MARKET STREET
SUITE 400
SAN FRANCISCO CA 94103

Purpose of Disbursement: TRANSPORTATION SVC
Candidate Name: _____
Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement: 08 / 13 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I615
Amount of Each Disbursement this Period: 33.40
CAR SERVICE
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)
A. MCKAY, KENNETH, K., MR., IV

Mailing Address 18 ARMINGTON AVENUE

City NORTH KINGSTOWN State RI Zip Code 02852

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I418
Amount of Each Disbursement this Period
35000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I390
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB21B.I386
Amount of Each Disbursement this Period
30.00

Memo Item

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

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

35530.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I387
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Candidate Name	Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I388
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Candidate Name	Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I394
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement BANK FEE	Candidate Name	Amount of Each Disbursement this Period 460.59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 003	

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

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

520.59
[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. EDNEXUS ADVISORS, LLC

Mailing Address 2126 CONNECTICUT AVENUE NW
UNIT #27

City
WASHINGTON

State
DC

Zip Code
20008

Purpose of Disbursement
FINANCE CONSULTING

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I393

Amount of Each Disbursement this Period

50000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I391

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I392

Amount of Each Disbursement this Period

30.00

Memo Item

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

50045.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. FOLEY & LARDNER, LLP

Mailing Address 3000 K STREET, NW
SUITE 600

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
LEGAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I237

Amount of Each Disbursement this Period

[REDACTED] 22316.50

Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK, N.A.

Mailing Address 420 MONTGOMERY

City
SAN FRANCISCO

State
CA

Zip Code
94104

Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I395

Amount of Each Disbursement this Period

[REDACTED] 15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
BANK FEE

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I396

Amount of Each Disbursement this Period

[REDACTED] 112.80

Memo Item

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

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

[REDACTED] 22444.30

[REDACTED]

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial)

A. DOUBLES

Mailing Address 783 FIFTH AVENUE
PLAZA 1-9595

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
FOOD/BEVERAGE

001
 002
 003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I238
Amount of Each Disbursement this Period
2671.00

Memo Item FUNDRAISING RECEPTION
CATERING DEPOSIT

Full Name (Last, First, Middle Initial)

B. NEW REPUBLICAN LLC

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL

001
 002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I239
Amount of Each Disbursement this Period
10209.94

Memo Item EXPENSE REIMBURSEMENT -
TRAVEL AND ACCOMODATIONS

Full Name (Last, First, Middle Initial)

C. COLD HARBOR FILMS LTD

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA

003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y
09 / 28 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I241
Amount of Each Disbursement this Period
41500.00

Memo Item MEDIA PRODUCTION

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

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

54380.94

**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"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. COLD HARBOR FILMS LTD		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I242
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MEDIA	<input type="checkbox"/> 004	Amount of Each Disbursement this Period 43559.00
Candidate Name	Category/ Type	MEDIA PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. COLD HARBOR FILMS LTD		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I243
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MEDIA	<input type="checkbox"/> 004	Amount of Each Disbursement this Period 43562.00
Candidate Name	Category/ Type	MEDIA PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. COLD HARBOR FILMS LTD		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I244
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MEDIA	<input type="checkbox"/> 004	Amount of Each Disbursement this Period 5491.00
Candidate Name	Category/ Type	MEDIA PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	92612.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Rebuilding America Now

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I397
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO BANK, N.A.		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address 420 MONTGOMERY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I398
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I400
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement BANK FEE	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 183.68	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

[REDACTED] 243.68

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

[REDACTED]

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1620.00 </div> Transaction ID : SE24.174 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 07 22 2016 </div>
City ALEXANDRIA	State VA	
Zip Code 22314	Category/Type 004	
Purpose of Expenditure MEDIA		Name of Federal Candidate: TRUMP, DONALD, J., ,
Name of Federal Candidate: TRUMP, DONALD, J., ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 15308065.25 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item CASTLEBLACK, LLC LIST RENTAL		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 07 08 2016 </div>
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 10800.00 </div> Transaction ID : SE24.52 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 07 08 2016 </div>
City ALEXANDRIA	State VA	
Zip Code 22314	Category/Type 004	
Purpose of Expenditure LIST RENTAL		Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 15308065.25 </div>		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; width: 150px;"> 12420.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; 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.

MARSTON, CHRISTOPHER, , ,

[Electronically Filed]

Date

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

07
25
2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ C C00618876
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item CASTLEBLACK, LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 117 NORTH SAINT ASAPH STREET	Amount <input type="text"/> -10800.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24.228 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure REFUND OF LIST RENTAL FEE Category/Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 15308065.25	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 SLATERS LANE	Amount <input type="text"/> 40655.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24.53 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure MEDIA Category/Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 15308065.25	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 29855.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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.

CALL, RYAN, R., , ESQ. [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 07 / 2016			
Mailing Address 815 SLATERS LANE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 40500.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City ALEXANDRIA</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City ALEXANDRIA	State VA	Zip Code 22314
City ALEXANDRIA		State VA	Zip Code 22314	
Purpose of Expenditure MEDIA	Category/Type 004			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 15308065.25 </div>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____				

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 07 / 2016			
Mailing Address 815 SLATERS LANE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 42160.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City ALEXANDRIA</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City ALEXANDRIA	State VA	Zip Code 22314
City ALEXANDRIA		State VA	Zip Code 22314	
Purpose of Expenditure MEDIA	Category/Type 004			
Name of Federal Candidate: TRUMP, DONALD, J., ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 15308065.25 </div>			
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; width: 150px;"> 82660.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
07 / 09 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Rebuilding America Now
FEC IDENTIFICATION NUMBER
C C00618876

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

Full Name of Payee: COLD HARBOR FILMS LTD MEDIA PRODUCTION
Mailing Address: 815 SLATERS LANE
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Expenditure: MEDIA Category/Type: 004
Date of Public Distribution/Dissemination: 07/07/2016
Amount: 42742.00
Transaction ID: SE24.56
Date of Disbursement or Obligation: 07/08/2016

Name of Federal Candidate: TRUMP, DONALD, J.,
Support [checked] Oppose []
Office Sought: President [checked] House [] Senate []
Disbursement For: General [checked] Primary [] Other []
Calendar Year-To-Date Per Election for Office Sought: 15308065.25

Full Name of Payee: COLD HARBOR FILMS LTD MEDIA PRODUCTION
Mailing Address: 815 SLATERS LANE
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Expenditure: MEDIA Category/Type: 004
Date of Public Distribution/Dissemination: 07/25/2016
Amount: 40500.00
Transaction ID: SE24.171
Date of Disbursement or Obligation: 07/22/2016

Name of Federal Candidate: CLINTON, HILLARY, RODHAM,
Support [checked] Oppose []
Office Sought: President [checked] House [] Senate []
Disbursement For: General [checked] Primary [] Other []
Calendar Year-To-Date Per Election for Office Sought: 15308065.25

(a) SUBTOTAL of Itemized Independent Expenditures: 83242.00
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) 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.

CALL, RYAN, R., ESQ.

[Electronically Filed]

Date

07/09/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Rebuilding America Now
FEC IDENTIFICATION NUMBER
C C00618876

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

Full Name of Payee
COLD HARBOR FILMS LTD
MEDIA PRODUCTION
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 42742.00
Transaction ID: SE24.172
Date of Disbursement or Obligation 07/22/2016

Name of Federal Candidate: TRUMP, DONALD, J.,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
COLD HARBOR FILMS LTD
MEDIA PRODUCTION
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 2010.00
Transaction ID: SE24.173
Date of Disbursement or Obligation 07/22/2016

Name of Federal Candidate: CLINTON, HILLARY, RODHAM,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 44752.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

MARSTON, CHRISTOPHER, ,

[Electronically Filed]

Date

07/22/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Rebuilding America Now
FEC IDENTIFICATION NUMBER
C C00618876

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

Full Name of Payee
COLD HARBOR FILMS LTD
MEDIA PRODUCTION
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type 004
Date of Public Distribution/Dissemination 07/25/2016
Amount 5000.00
Transaction ID: SE24.180
Date of Disbursement or Obligation 07/25/2016

Name of Federal Candidate: CLINTON, HILLARY, RODHAM,
Support Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 15308065.25

Full Name of Payee
COLD HARBOR FILMS LTD
MEDIA PRODUCTION
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type 004
Date of Public Distribution/Dissemination 08/08/2016
Amount 41587.00
Transaction ID: SE24.192
Date of Disbursement or Obligation 08/04/2016

Name of Federal Candidate: CLINTON, HILLARY, RODHAM,
Support Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 15308065.25

(a) SUBTOTAL of Itemized Independent Expenditures 46587.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

CALL, RYAN, R., ESQ.

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Date 07/25/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 11 / 2016	
Mailing Address 815 SLATERS LANE		Amount 4426.25	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.208 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 10 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	
Name of Federal Candidate: TRUMP, DONALD, J., ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 26 / 2016	
Mailing Address 815 SLATERS LANE		Amount 5000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.245 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 28 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	9426.25
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div> Transaction ID : SE24.247 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 29 / 2016
City ALEXANDRIA	State VA	
Zip Code 22314	Category/ Type 004	
Purpose of Expenditure MEDIA		Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item COLD HARBOR FILMS LTD MEDIA PRODUCTION		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">36000.00</div> Transaction ID : SE24.248 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 29 / 2016
City ALEXANDRIA	State VA	
Zip Code 22314	Category/ Type 004	
Purpose of Expenditure MEDIA		Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		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; text-align: right;">76000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00618876 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION NATIONAL CABLE AND BROADCAST ADVERTISING		Date of Public Distribution/Dissemination 07 / 25 / 2016
Mailing Address 915 KING STREET 2ND FLOOR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">833333.33</div>
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Expenditure MEDIA	Category/Type 004	Transaction ID : SE24.189 Date of Disbursement or Obligation 07 / 22 / 2016
Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION NATIONAL CABLE AND BROADCAST ADVERTISING		Date of Public Distribution/Dissemination 07 / 25 / 2016
Mailing Address 915 KING STREET 2ND FLOOR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1666666.67</div>
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Expenditure MEDIA	Category/Type 004	Transaction ID : SE24.165 Date of Disbursement or Obligation 07 / 22 / 2016
Name of Federal Candidate: <input checked="" type="checkbox"/> Support TRUMP, DONALD, J., , <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		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; text-align: right;">2500000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

07 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ C C00618876
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 915 KING STREET 2ND FLOOR		Amount <input type="text"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Category/Type <input type="text"/>		Transaction ID : SE24.183

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 915 KING STREET 2ND FLOOR		Amount <input type="text"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD, J., ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Category/Type <input type="text"/>		Transaction ID : SE24.184

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 08 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount 208444.00
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.198 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 04 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate: TRUMP, DONALD, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 08 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount 625330.00
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.199 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 04 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <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: _____	
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	833774.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
--	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2016
Mailing Address 915 KING STREET 2ND FLOOR		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1746350.00 </div>
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Expenditure MEDIA	Category/Type 004
Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2016
Mailing Address 915 KING STREET 2ND FLOOR		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1746350.00 </div>
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Expenditure MEDIA	Category/Type 004
Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		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;"> 3492700.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
--	---

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 18 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount 123920.00
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.214 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 23 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount 123920.00
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.222 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 23 / 2016
Purpose of Expenditure MEDIA		Category/Type 004	Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	247840.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) 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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ C C00618876
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 915 KING STREET 2ND FLOOR		Amount <input type="text"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 915 KING STREET 2ND FLOOR		Amount <input type="text"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 26 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;">237480.00</div> Transaction ID : SE24.226 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2016
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure MEDIA		Category/Type 005	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item MULTI MEDIA SERVICES CORPORATION MEDIA PLACEMENT			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 26 / 2016
Mailing Address 915 KING STREET 2ND FLOOR			Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;">762520.00</div> Transaction ID : SE24.227 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2016
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure MEDIA		Category/Type 004	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 15308065.25		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 gray; padding: 2px; display: inline-block;">1000000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Rebuilding America Now
FEC IDENTIFICATION NUMBER
C C00618876

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

Full Name of Payee
MULTI MEDIA SERVICES CORPORATION
MEDIA PLACEMENT
Mailing Address
915 KING STREET
2ND FLOOR
City
ALEXANDRIA
State
VA
Zip Code
22314
Purpose of Expenditure
MEDIA
Category/Type
004
Date of Public Distribution/Dissemination
09 / 15 / 2016
Amount
1344000.00
Transaction ID : SE24.389
Date of Disbursement or Obligation
09 / 14 / 2016

Name of Federal Candidate:
TRUMP, DONALD, J.,
Support
Office Sought:
President
Disbursement For:
General
2016

Full Name of Payee
MULTI MEDIA SERVICES CORPORATION
MEDIA PLACEMENT
Mailing Address
915 KING STREET
2ND FLOOR
City
ALEXANDRIA
State
VA
Zip Code
22314
Purpose of Expenditure
MEDIA
Category/Type
004
Date of Public Distribution/Dissemination
09 / 30 / 2016
Amount
500000.00
Transaction ID : SE24.246
Date of Disbursement or Obligation
09 / 29 / 2016

Name of Federal Candidate:
CLINTON, HILLARY, RODHAM,
Oppose
Office Sought:
President
Disbursement For:
General
2016

(a) SUBTOTAL of Itemized Independent Expenditures 1844000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

CALL, RYAN, R., ESQ.

[Electronically Filed]

Date 09 / 14 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Rebuilding America Now	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00618876 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item NATIONAL MEDIA DIGITAL DIGITAL ADVERTISING	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 19 / 2016						
Mailing Address 815 SLATERS LANE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 30000.00 </div> Transaction ID : SE24.145 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 19 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>ALEXANDRIA</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	ALEXANDRIA	VA	22314
City		State	Zip Code				
ALEXANDRIA	VA	22314					
Purpose of Expenditure MEDIA Category/Type 004							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J. , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought 15308065.25	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item NATIONAL MEDIA DIGITAL NATIONAL DIGITAL ADVERTISING	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 815 SLATERS LANE	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 44000.00 </div> Transaction ID : SE24.167 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 22 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>ALEXANDRIA</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	ALEXANDRIA	VA	22314
City		State	Zip Code				
ALEXANDRIA	VA	22314					
Purpose of Expenditure MEDIA Category/Type 004							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J. , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought 15308065.25	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; width: 100%;"> 74000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> _____ </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.

CALL, RYAN, R., , ESQ.

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 07 / 21 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Rebuilding America Now
FEC IDENTIFICATION NUMBER
C C00618876

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

Full Name of Payee NATIONAL MEDIA DIGITAL SOCIAL MEDIA PLACEMENT
Mailing Address 815 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA Category/Type 004
Date of Public Distribution/Dissemination 09/26/2016
Amount 1000.00
Transaction ID: SE24.240
Date of Disbursement or Obligation 09/27/2016

Name of Federal Candidate: TRUMP, DONALD, J.,
Support Oppose
Office Sought: President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. Rows include (a) SUBTOTAL of Itemized Independent Expenditures (1000.00), (a) SUBTOTAL of Unitemized Independent Expenditures, and (a) TOTAL Independent Expenditures (13876562.25).

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.

CALL, RYAN, R., ESQ.

[Electronically Filed]

Date

09/27/2016

Signature