

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 GOOD FUND, THE

ADDRESS (number and street) PO BOX 6572 Check if different than previously reported. (ACC) SPRINGFIELD VA 22150

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00409185 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09 / 01 / 2016 through 09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer McMenam, Laura, , ,

Signature of Treasurer McMenam, Laura, , , [Electronically Filed] Date 10 / 05 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**GOOD FUND, THE**

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="94057.93"/>	<input type="text" value="94057.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="147825.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="31000.00"/>	<input type="text" value="267185.00"/>
(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="178825.58"/>	<input type="text" value="361242.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18179.87"/>	<input type="text" value="200597.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="160645.71"/>	<input type="text" value="160645.71"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**GOOD FUND, THE**

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).....	6000.00	28500.00
(ii) Unitemized .....	0.00	185.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6000.00	28685.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	22000.00	235500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28000.00	264185.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3000.00	3000.00
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)).....▶	31000.00	267185.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	31000.00	267185.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6429.87	126947.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6429.87	126947.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	67650.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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).....	750.00	6000.00
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)) ..	18179.87	200597.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18179.87	200597.22

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	28000.00	264185.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28000.00	264185.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6429.87	126947.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6429.87	126947.22

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**GOOD FUND, THE**

**A. Frazee, Elizabeth, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6313 Everymay Drive  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TwinLogic Strategies Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2016  
**Transaction ID : 2636**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Tripodi, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3724 N Vermont St  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Nickles Group Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016  
**Transaction ID : 2637**  
 Amount of Each Receipt this Period 1000.00  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**GOOD FUND, THE**

**A. ARGENTUM'S SILVER PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1650 KING STREET  
SUITE 602

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00338020

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 29 / 2016  
**Transaction ID : 2635**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 S. AKARD STREET  
SUITE 1812

City DALLAS State TX Zip Code 75202

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
09 / 30 / 2016  
**Transaction ID : 2645**

Amount of Each Receipt this Period  
4000.00

Memo Item

**C. CROPLIFE AMERICA POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1156 15TH STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00248849

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 30 / 2016  
**Transaction ID : 2643**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14000.00
<b>TOTAL</b> 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 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**GOOD FUND, THE**

**A. ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)**

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

Mailing Address 1015 15TH ST. NW  
SUITE 200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00323048

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 06 / 2016

**Transaction ID : 2623**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. SAP AMERICA INC. PAC**

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

Mailing Address 3999 WEST CHESTER PIKE

City NEWTOWN SQUARE State PA Zip Code 19073

FEC ID number of contributing federal political committee. **C** C00367375

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : 2642**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. THE WENDY'S COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address P.O. BOX 15441

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00369090

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : 2644**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	22000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**GOOD FUND, THE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Sycuan Band of the Kumeyaay Nation

Mailing Address 2 Kwaaypaay Court

City El Cajon State CA Zip Code 92019

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : 2622**

Amount of Each Receipt this Period

Memo Item

**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.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

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.

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="3000.00"/>

**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)  
**GOOD FUND, THE**

**A. Goodlatte, Robert, W., ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5341 Fox Ridge Road

City Roanoke State VA Zip Code 24018

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 19 / 2016

FEC Identification Number: C

**Transaction ID : 2632**

Amount of Each Disbursement this Period: 1429.87

Memo Item

**B. Hinaman & Company**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 863

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
Consultant: Political

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

**Transaction ID : 2639**

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. Laura Bell Consulting, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 7007 Springville Court

City Springfield State VA Zip Code 22150

Purpose of Disbursement  
Consultant: Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

**Transaction ID : 2638**

Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5929.87

**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)  
**GOOD FUND, THE**

**A. Political Compliance Services**

Full Name (Last, First, Middle Initial)

Mailing Address 912 Saint Michael Drive

City Gambrills State MD Zip Code 21054

Purpose of Disbursement  
Consultant: Compliance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 01 / 2016

FEC Identification Number: C

Transaction ID : 2616

Amount of Each Disbursement this Period: 500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6429.87

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**GOOD FUND, THE**

Full Name (Last, First, Middle Initial) <b>A. BERGMANFORCONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address N5070 CISCO LAKE ROAD		FEC Identification Number C 000614214 <b>Transaction ID : 2625</b> Amount of Each Disbursement this Period 1000.00
City WATERSMEET	State MI	Zip Code 49969
Purpose of Disbursement Political Contribution		Category/ Type
Candidate Name <b>BERGMAN, JOHN, , ,</b>		
Office Sought: <input checked="" 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: MI	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. BRIAN MAST FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address 2600 S DOUGLAS RD STE 900		FEC Identification Number C 000579896 <b>Transaction ID : 2627</b> Amount of Each Disbursement this Period 1000.00
City CORAL GABLES	State FL	Zip Code 33134
Purpose of Disbursement Political Contribution		Category/ Type
Candidate Name <b>MAST, BRIAN, , ,</b>		
Office Sought: <input checked="" 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: FL	District: 18	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. HOUSE CONSERVATIVES FUND</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address 228 S. WASHINGTON STREET SUITE 115		FEC Identification Number C 000326439 <b>Transaction ID : 2631</b> Amount of Each Disbursement this Period 2500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement Political Contribution		Category/ Type
Candidate Name <b>HOUSE CONSERVATIVES FUND</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	<input type="checkbox"/> Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**GOOD FUND, THE**

**A. JASON LEWIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 515

City COTTAGE GROVE State MN Zip Code 55016

Purpose of Disbursement Political Contribution

Candidate Name LEWIS, JASON, MARK MR., ,

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

State: MN District: 02

Date of Disbursement: 09 / 07 / 2016

FEC Identification Number: C00589234  
Transaction ID : 2629  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. MIKE GALLAGHER FOR WISCONSIN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1027

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement Political Contribution

Candidate Name GALLAGHER, MICHAEL, JOHN, ,

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

State: WI District: 08

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C00610212  
Transaction ID : 2626  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. SCOTT GARRETT FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 905

City NEWTON State NJ Zip Code 07860

Purpose of Disbursement Political Contribution

Candidate Name GARRETT, SCOTT, REP., ,

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

State: NJ District: 05

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C00386110  
Transaction ID : 2624  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)  
**A. TENNEY FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2016

Mailing Address **28 ROBINSON ROAD  
PO BOX 128**

City **CLINTON** State **NY** Zip Code **13323**

FEC Identification Number

**C** C00561183

**Transaction ID : 2628**  
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement  
Political Contribution

Candidate Name  
**TENNEY, CLAUDIA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 22

Full Name (Last, First, Middle Initial)  
**B. TOM GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

Mailing Address **P.O. BOX 209**

City **RUCKERSVILLE** State **VA** Zip Code **22968**

FEC Identification Number

**C** C00607101

**Transaction ID : 2634**  
Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement  
Political Contribution

Candidate Name  
**GARRETT, THOMAS, ALEXANDER MR. JR., ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: VA District: 05

Full Name (Last, First, Middle Initial)  
**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Purpose of Disbursement

Candidate Name

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

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

3500.00

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

11000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**GOOD FUND, THE**

Full Name (Last, First, Middle Initial) <b>A. George Hirschmann Campaign</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016
Mailing Address P.O. Box 1343		FEC Identification Number C [ ] <b>Transaction ID : 2633</b> Amount of Each Disbursement this Period [ ] 250.00
City Harrisonburg	State VA	Zip Code 22802
Purpose of Disbursement State Candidate Political Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Terry L. Austin for House of Delegates</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address P.O. Box 400		FEC Identification Number C [ ] <b>Transaction ID : 2641</b> Amount of Each Disbursement this Period [ ] 500.00
City Buchanan	State VA	Zip Code 24066
Purpose of Disbursement State Candidate Political Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 750.00