



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**HEINEKEN USA INC GOOD GOVERNMENT FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="125757.83"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="131676.98"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2982.03"/>	<input type="text" value="8901.18"/>
(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="134659.01"/>	<input type="text" value="134659.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="129659.01"/>	<input type="text" value="129659.01"/>
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

**HEINEKEN USA INC GOOD GOVERNMENT FUND**

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).....	743.62	849.82
(ii) Unitemized .....	2238.41	8051.36
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2982.03	8901.18
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2982.03	8901.18
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2982.03	8901.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2982.03	8901.18

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5000.00	5000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	5000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	2982.03	8901.18
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2982.03	8901.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 9
	<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	

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)  
**HEINEKEN USA INC GOOD GOVERNMENT FUND**

**A. BRIAN CROCHET**  
Full Name (Last, First, Middle Initial)

Mailing Address 480 Forrest Park Circle

City Franklin State TN Zip Code 37064

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

Name of Employer Heineken USA Occupation Zone Director - Midland Zone

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **219.39**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : C80742**

Amount of Each Receipt this Period **77.71**

\* Payroll Deduction:

**B. John Doolan**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 Somerset Avenue

City Fairfield State CT Zip Code 06824

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

Name of Employer Heineken USA Occupation VP Region NEBRU

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **299.21**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : C80751**

Amount of Each Receipt this Period **103.65**

\* Payroll Deduction:

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

Mailing Address 54 Trap Falls Road  
Heather Ridge Condominium

City Shelton State CT Zip Code 06484

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

Name of Employer Heineken USA Occupation Dir.Natl Pricing & Value Chain

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **201.10**

Date of Receipt **03 / 31 / 2015**

**Transaction ID : C80734**

Amount of Each Receipt this Period **70.94**

\* Payroll Deduction:

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>252.30</b>
<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 7 OF 9
<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)  
**HEINEKEN USA INC GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial) <b>A. Alexander Jackson</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2015 <b>Transaction ID : C80739</b>
Mailing Address 4 Martine Avenue #505		Amount of Each Receipt this Period 77.00
City White Plains	State NY	Zip Code 10606
FEC ID number of contributing federal political committee. C		* Payroll Deduction:
Name of Employer Heineken USA	Occupation SVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

Full Name (Last, First, Middle Initial) <b>B. JULIE KINCH</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2015 <b>Transaction ID : C80741</b>
Mailing Address 32 Kilmer Road		Amount of Each Receipt this Period 80.00
City Larchmont	State NY	Zip Code 10538
FEC ID number of contributing federal political committee. C		* Payroll Deduction:
Name of Employer Heineken USA	Occupation Sr. VP Chief Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Stacey Tank</b>		Date of Receipt MM / DD / YYYY 03 / 13 / 2015 <b>Transaction ID : C80743</b>
Mailing Address 220 Old Spring Rd		Amount of Each Receipt this Period 43.06
City Fairfield	State CT	Zip Code 06824-5246
FEC ID number of contributing federal political committee. C		* Payroll Deduction:
Name of Employer Heineken Usa, Inc.	Occupation SVP & Chief Corporate Relations Office	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.30	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.06
<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 9
	<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)  
**HEINEKEN USA INC GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial) <b>A. STEVE TRAMPOSCH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2015 <b>Transaction ID : C80745</b>
Mailing Address 35 Little Brook Lane		Amount of Each Receipt this Period 88.24
City Newtown	State CT	Zip Code 06470
FEC ID number of contributing federal political committee. C		
Name of Employer Heineken USA	Occupation VP Insights & Analytics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.72	* Payroll Deduction:

Full Name (Last, First, Middle Initial) <b>B. Colin Westcott-Pitt</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2015 <b>Transaction ID : C80750</b>
Mailing Address Apt. 12C 159 Madison Avenue		Amount of Each Receipt this Period 106.20
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C		
Name of Employer Heineken USA	Occupation VP DosXX, Amstel, Newcastle	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.60	* Payroll Deduction:

Full Name (Last, First, Middle Initial) <b>C. Rick Wright</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2015 <b>Transaction ID : C80747</b>
Mailing Address 2 Nancy Lane		Amount of Each Receipt this Period 96.82
City Brookfield	State CT	Zip Code 06804
FEC ID number of contributing federal political committee. C		
Name of Employer Heineken USA	Occupation VP Distributor NetWork Devlp.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.46	* Payroll Deduction:

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.26
<b>TOTAL</b> This Period (last page this line number only).....▶	743.62

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HEINEKEN USA INC GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial)

**A. Friends of John Thune**

Mailing Address PO Box 841

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
US Senate SD

011

Category/  
Type

Candidate Name

**JOHN R THUNE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : D834**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**B. Friends of Schumer**

Mailing Address 192 Lexington Avenue, Suite 1001

City State Zip Code  
New York NY 10016

Purpose of Disbursement  
US Senate NY

011

Category/  
Type

Candidate Name

**Sen. Charles E Schumer**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

**Transaction ID : D833**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

5000.00
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**TOTAL** This Period (last page this line number only)..... ▶

5000.00
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