

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 Eye of the Tiger Political Action Committee

ADDRESS (number and street) PO Box 2485 Check if different than previously reported. (ACC) Springfield VA 22152-0485

2. FEC IDENTIFICATION NUMBER C C00467431 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 Report (X), Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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 Robert Carlin

Signature of Treasurer Robert Carlin [Electronically Filed] Date 04 / 20 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Eye of the Tiger Political Action Committee**

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="127783.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="127783.12"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="260168.55"/>	<input type="text" value="260168.55"/>
(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="387951.67"/>	<input type="text" value="387951.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="291802.87"/>	<input type="text" value="291802.87"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="96148.80"/>	<input type="text" value="96148.80"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Eye of the Tiger Political Action Committee**

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).....	400.00	400.00
(ii) Unitemized .....	800.00	800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1200.00	1200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	49000.00	49000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	50200.00	50200.00
12. Transfers From Affiliated/Other Party Committees.....	209968.55	209968.55
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))..... ▶	260168.55	260168.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	260168.55	260168.55

**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 .....	55317.87	55317.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	55317.87	55317.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	232985.00	232985.00
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 .....	3500.00	3500.00
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)) ..	291802.87	291802.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	291802.87	291802.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	50200.00	50200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	50200.00	50200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	55317.87	55317.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	55317.87	55317.87

**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 90  
(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)  
**Eye of the Tiger Political Action Committee**

**A. LISA ANN WOZNYLUCIANIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 BROOK AVENUE  
 City PASSAIC State NJ Zip Code 07055-2403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PASSAIC BOARD OF EDUCATION Occupation PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2015  
**Transaction ID : SA11.10183**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
**CONTRIBUTION**

**B. LISA ANN WOZNYLUCIANIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 BROOK AVENUE  
 City PASSAIC State NJ Zip Code 07055-2403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PASSAIC BOARD OF EDUCATION Occupation PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 14 / 2015  
**Transaction ID : SA11.10184**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
**CONTRIBUTION**

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	400.00

**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 90
<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 400W

City WASHINGTON State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2015

**Transaction ID : SA11.10169**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)**

Mailing Address 655 BEACH STREET

City SAN FRANCISCO State CA Zip Code 94109-1342

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2015

**Transaction ID : SA11.10173**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AMERICAN ACADEMY OF DERMATOLOGY ASSOC PAC**

Mailing Address 1445 NEW YORK AVENUE NW  
STE 800

City WASHINGTON State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 27 / 2015

**Transaction ID : SA11.10180**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 90
<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)  
**Eye of the Tiger Political Action Committee**

**A. ANTHEM PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 120 MONUMENT CIRCLE

City INDIANAPOLIS State IN Zip Code 46204-4906

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
03 / 27 / 2015  
**Transaction ID : SA11.10177**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. GENERAL ELECTRIC PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
02 / 13 / 2015  
**Transaction ID : SA11.10182**

Amount of Each Receipt this Period  
4000.00

Memo Item  
CONTRIBUTION

**C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 11 / 2015  
**Transaction ID : SA11.10175**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<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 9 OF 90
<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)  
**Eye of the Tiger Political Action Committee**

**A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 CONSTITUTION AVE NW  
 City WASHINGTON State DC Zip Code 20001-2133  
 FEC ID number of contributing federal political committee. **C** C00096156  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 11 / 2015  
**Transaction ID : SA11.10179**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 CONTRIBUTION

**B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KO)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 14TH ST NW  
 City WASHINGTON State DC Zip Code 20005-2008  
 FEC ID number of contributing federal political committee. **C** C00236489  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 22 / 2015  
**Transaction ID : SA11.10171**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item  
 CONTRIBUTION

**C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KO)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 14TH ST NW  
 City WASHINGTON State DC Zip Code 20005-2008  
 FEC ID number of contributing federal political committee. **C** C00236489  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 23 / 2015  
**Transaction ID : SA11.10181**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<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 10 OF 90
<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)  
**Eye of the Tiger Political Action Committee**

**A. LOCKHEED MARTIN EMPLOYEES' PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 8TH ST NW SUITE 700 SOUTH  
 City WASHINGTON State DC Zip Code 20001-3854  
 FEC ID number of contributing federal political committee. **C** C00303024  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11.10172**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
**CONTRIBUTION**

**B. MEDTRONIC INC. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 950 F STREET NW SUITE 500  
 City WASHINGTON State DC Zip Code 20004-1478  
 FEC ID number of contributing federal political committee. **C** C00311878  
 Name of Employer Occupation  
 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  
 06 / 25 / 2015  
**Transaction ID : SA11.10170**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 EXECUTIVE CIR  
 City IRVING State TX Zip Code 75038-2522  
 FEC ID number of contributing federal political committee. **C** C00140061  
 Name of Employer Occupation  
 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  
 03 / 13 / 2015  
**Transaction ID : SA11.10178**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<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 11 OF 90
<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address 601 THIRTEENTH STREET NW  
STE 910 S

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**Transaction ID : SA11.10168**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. U.S. TRAVEL ASSOCIATION PAC**

Mailing Address 1100 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20005-3918

FEC ID number of contributing federal political committee. **C** C00457754

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2015

**Transaction ID : SA11.10176**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VERIZON COMMUNICATIONS GOOD GOVERNMENT CLUB**

Mailing Address 1300 I STREET NWSUITE 400 WEST

City WASHINGTON State DC Zip Code 20005-

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2015

**Transaction ID : SA11.10174**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	49000.00

**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 12 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. SCALISE LEADERSHIP FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00568162  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209968.55

Date of Receipt 02 / 05 / 2015  
**Transaction ID : SA12.10928**  
 Amount of Each Receipt this Period 6749.07  
 Memo Item  
 TRANSFER  
 TRANSFER OF NET JFC FUNDS TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. RAYMOND J. BRANDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3017 12TH STREET  
 City METAIRIE State LA Zip Code 70002-3601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation RAY BRANDT AUTO OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 22 / 2014  
**Transaction ID : SA12.10.3.002**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. MICHAEL T. GRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 6202  
 City METAIRIE State LA Zip Code 70009-6202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation GRAY INSURANCE COMPANY INSURANCE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 10 / 2014  
**Transaction ID : SA12.9.3.002**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6749.07
<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 13 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. SCALISE LEADERSHIP FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00568162  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209968.55

Date of Receipt 03 / 27 / 2015  
**Transaction ID : SA12.10929**  
 Amount of Each Receipt this Period 85198.53  
 Memo Item  
 TRANSFER  
 TRANSFER OF NET JFC FUNDS TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. CESAR ALVAREZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 333 S.E. 2ND AVE 44TH FLOOR  
 City MIAMI State FL Zip Code 33131-2176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation ATTORNEY GREENBURG TRAUIG, LLP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 03 / 19 / 2015  
**Transaction ID : SA12.235.3.3**  
 Amount of Each Receipt this Period 4600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. EDWARD BOETTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 812 GRAVIER STREET SUITE 200  
 City NEW ORLEANS State LA Zip Code 70112-1467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation HRI PROPERTIES DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 599.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : SA12.108.3.3**  
 Amount of Each Receipt this Period 599.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....▶ 85198.53  
**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 14 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. DONALD T. BOLLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4097  
 City HOUMA State LA Zip Code 70361-4097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOLLINGER ENTERPRISES, LLC Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 02 / 2015  
**Transaction ID : SA12.28.3.3**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. MR. GARY CHOUET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 310  
 City GALLIANO State LA Zip Code 70354-0310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EDISON CHOUET OFFSHORE Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 05 / 2015  
**Transaction ID : SA12.142.3.3**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. Z DAVID DELOACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10119 TUNICA TRACE  
 City SAINT FRANCISVILLE State LA Zip Code 70775-5611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DELOACH MARINE SERVICES Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : SA12.118.3.3**  
 Amount of Each Receipt this Period 2600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. C MARKHAM DICKSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 51367

City SHREVEPORT	State LA	Zip Code 71135-1367
FEC ID number of contributing federal political committee. C		
Name of Employer MORRIS & DICKSON CO.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2015  
**Transaction ID : SA12.81.3.3**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. MARKHAM A. DICKSON JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 51367

City SHREVEPORT	State LA	Zip Code 71135-1367
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2015  
**Transaction ID : SA12.85.3.3**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. PAUL DICKSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 51367

City SHREVEPORT	State LA	Zip Code 71135-1367
FEC ID number of contributing federal political committee. C		
Name of Employer MORRIS & DICKSON CO., LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2015  
**Transaction ID : SA12.84.3.3**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 16 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. PAUL H. FLOWER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S JEFFERSON DAVIS PARKWAY

City NEW ORLEANS	State LA	Zip Code 70125-1219
---------------------	-------------	------------------------

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

Name of Employer WOODWARD DESIGN & BUILD	Occupation CEO
---------------------------------------------	-------------------

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
03	/	16	/	2015

**Transaction ID : SA12.209.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. SHANE GUIDRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 701 POYDRAS STE

City NEW ORLEANS	State LA	Zip Code 70139-6001
---------------------	-------------	------------------------

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

Name of Employer HARVEY GULF INTL. MARINE	Occupation CEO
----------------------------------------------	-------------------

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
03	/	09	/	2015

**Transaction ID : SA12.205.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. JOHN L. NAU III**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 130130

City HOUSTON	State TX	Zip Code 77219-0130
-----------------	-------------	------------------------

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

Name of Employer SILVER EAGLE DISTRIBUTORS	Occupation PRESIDENT & CEO
-----------------------------------------------	-------------------------------

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
02	/	27	/	2015

**Transaction ID : SA12.131.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 17 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. JOHN G. RANGOS SR**  
Full Name (Last, First, Middle Initial)

Mailing Address 701 OSPREY POINT CIRCLE

City BOCA RATON State FL Zip Code 33431-5245

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 09 / 2015  
**Transaction ID : SA12.160.3.3**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. SAMMY R. ZITO**  
Full Name (Last, First, Middle Initial)

Mailing Address 732 RURAL STREET

City RIVER RIDGE State LA Zip Code 70123-3660

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

Name of Employer ZITO COMPANIES Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2015  
**Transaction ID : SA12.26.3.3**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. ACTION COMMITTEE FOR RURAL ELECTRIFICATION PAC (ACRE PAC)**  
Full Name (Last, First, Middle Initial)

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 16 / 2015  
**Transaction ID : SA12.207.3.3**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 18 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. AMERICA'S HEALTH INSURANCE PLANS PAC**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 500

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2015

**Transaction ID : SA12.164.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. AMERICAN AIRLINES PAC**

Mailing Address 1101 17TH STREET N.W.  
SUITE 600

City WASHINGTON State DC Zip Code 20036-4718

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2015

**Transaction ID : SA12.19.3.3**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 1101 17TH STREET N.W.  
SUITE 600

City WASHINGTON State DC Zip Code 20036-4718

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2015

**Transaction ID : SA12.228.3.3**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 19 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. AT&T FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202-4206

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 27 / 2015

**Transaction ID : SA12.137.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. BLOOMIN' BRANDS, INC. POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2202 N WESTSHORE BLVD

City TAMPA State FL Zip Code 33607-5747

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2015

**Transaction ID : SA12.242.3.3**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. CENTURYLINK INC. EMPLOYEES PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1099 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20001-4411

FEC ID number of contributing federal political committee. **C** C00419911

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2015

**Transaction ID : SA12.232.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 20 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. DIRECTV PAC**

Mailing Address 901 F STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20004-1429

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
02 / 12 / 2015  
**Transaction ID : SA12.47.3.3**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. GENERAL ELECTRIC PAC**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
02 / 05 / 2015  
**Transaction ID : SA12.22.3.3**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC**

Mailing Address 539 S MAIN ST

City FINDLAY State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
02 / 13 / 2015  
**Transaction ID : SA12.64.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC**

Mailing Address 1600 DUKE ST

City ALEXANDRIA State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 19 / 2015  
**Transaction ID : SA12.239.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 28 / 2015  
**Transaction ID : SA12.27.3.3**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
02 / 27 / 2015  
**Transaction ID : SA12.135.3.3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 22 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. TRAVELERS COMPANIES PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address ONE TOWER SQUARE  
City HARTFORD State CT Zip Code 06183-0001  
FEC ID number of contributing federal political committee. **C** C00376376  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2015  
**Transaction ID : SA12.165.3.3**  
Amount of Each Receipt this Period 1000.00  
 Memo Item  
TRANSFER  
TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. SCALISE LEADERSHIP FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 9891  
City ARLINGTON State VA Zip Code 22219-1891  
FEC ID number of contributing federal political committee. **C** C00568162  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209968.55

Date of Receipt 05 / 14 / 2015  
**Transaction ID : SA12.10930**  
Amount of Each Receipt this Period 65647.28  
 Memo Item  
TRANSFER  
TRANSFER OF NET JFC FUNDS TRANSFER OF JOINT FUNDRAISING PROCEEDS

**C. KURT J. CROSBY**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 279  
City GOLDEN MEADOW State LA Zip Code 70357-0279  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
CROSBY TUGS, LLC CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 20 / 2015  
**Transaction ID : SA12.245.3.4**  
Amount of Each Receipt this Period 5000.00  
 Memo Item  
TRANSFER  
TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65647.28
<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 23 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

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

Mailing Address PO BOX 1083

City HOUSTON State TX Zip Code 77251-1083

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

Name of Employer: FREEPORT MCMORAN OIL & GAS Occupation: PRESIDENT & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4600.00

Date of Receipt: 03 / 31 / 2015  
**Transaction ID : SA12.380.3.4**

Amount of Each Receipt this Period: 4600.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. JOHN B. HESS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1185 AVENUE OF THE AMERICAS

City NY State NY Zip Code 10036-2601

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

Name of Employer: HESS CORPORATION Occupation: CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4600.00

Date of Receipt: 03 / 31 / 2015  
**Transaction ID : SA12.339.3.4**

Amount of Each Receipt this Period: 4600.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 3020 MACOMB STREET, NE

City WASHINGTON State DC Zip Code 20008-3317

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

Name of Employer: HESS CORPORATION Occupation: VP, GOVERNMENT & EXTERNAL AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 27 / 2015  
**Transaction ID : SA12.321.3.4**

Amount of Each Receipt this Period: 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 24 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. JED MANOCHERIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 E 50TH ST

City NEW YORK State NY Zip Code 10022-6817

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

Name of Employer WOODBRANCH INVESTMENTS Occupation REAL ESTATE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 22 / 2015  
**Transaction ID : SA12.415.3.4**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. MARK VALENTE III**  
Full Name (Last, First, Middle Initial)

Mailing Address 7055 LEESTONE STREET

City SPRINGFIELD State VA Zip Code 22151-3520

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

Name of Employer VALENTE & ASSOCIATES Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.461.3.4**

Amount of Each Receipt this Period 2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. AMERICAN ACADEMY OF EMERGENCY MEDICINE PAC**  
Full Name (Last, First, Middle Initial)

Mailing Address 555 E WELLS ST

City MILWAUKEE State WI Zip Code 53202-3835

FEC ID number of contributing federal political committee. **C** C00324780

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2015  
**Transaction ID : SA12.284.3.4**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 25 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON	State DC	Zip Code 20036-3902
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 27 / 2015  
**Transaction ID : SA12.262.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. AMERICAN CHEMISTRY COUNCIL PAC**

Mailing Address 700 2ND ST NE

City WASHINGTON	State DC	Zip Code 20002-8100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 31 / 2015  
**Transaction ID : SA12.341.3.4**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMI**

Mailing Address 1111 14TH ST NW

City WASHINGTON	State DC	Zip Code 20005-5603
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
04 / 29 / 2015  
**Transaction ID : SA12.448.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 26 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN HOTEL AND LODGING ASSOCIATION PAC**

Mailing Address 1201 NEW YORK AVE NW

City	State	Zip Code
WASHINGTON	DC	20005-3917

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer	Occupation

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
03	/	31	/	2015

**Transaction ID : SA12.355.3.4**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**

Mailing Address 1310 G ST NW

City	State	Zip Code
WASHINGTON	DC	20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer	Occupation

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
03	/	31	/	2015

**Transaction ID : SA12.350.3.4**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION**

Mailing Address 1201 15TH ST NW

City	State	Zip Code
WASHINGTON	DC	20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer	Occupation

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
03	/	27	/	2015

**Transaction ID : SA12.281.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 27 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. CME GROUP INC. PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 20 S WACKER DR  
City CHICAGO State IL Zip Code 60606-7431  
FEC ID number of contributing federal political committee. **C** C00076299  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2015  
**Transaction ID : SA12.278.3.4**  
Amount of Each Receipt this Period 5000.00  
 Memo Item  
TRANSFER  
TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. COMCAST CORPORATION & NBCUNIVERSAL PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1701 JOHN F KENNEDY BLVD  
City PHILADELPHIA State PA Zip Code 19103-2833  
FEC ID number of contributing federal political committee. **C** C00248716  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.364.3.4**  
Amount of Each Receipt this Period 3000.00  
 Memo Item  
TRANSFER  
TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. COMMUNITY ONCOLOGY ALLIANCE PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1101 PENNSYLVANIA AVE NW  
City WASHINGTON State DC Zip Code 20004-2504  
FEC ID number of contributing federal political committee. **C** C00383976  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2015  
**Transaction ID : SA12.276.3.4**  
Amount of Each Receipt this Period 5000.00  
 Memo Item  
TRANSFER  
TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. COX ENTERPRISES PAC (COXPAC) INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 975 F ST NW  
 City WASHINGTON State DC Zip Code 20004-1454  
 FEC ID number of contributing federal political committee. **C** C00477653  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.434.3.4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. CVS HEALTH PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1275 PENNSYLVANIA AVENUE NW SUITE 700  
 City WASHINGTON State DC Zip Code 20004-2448  
 FEC ID number of contributing federal political committee. **C** C00384818  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.330.3.4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1455 PENNSYLVANIA AVE NW  
 City WASHINGTON State DC Zip Code 20004-1008  
 FEC ID number of contributing federal political committee. **C** C00497917  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.432.3.4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. GRIDIRON-PAC**

Mailing Address 345 PARK AVE

City NY State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 31 / 2015  
**Transaction ID : SA12.328.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COM**

Mailing Address 300 M ST SE

City WASHINGTON State DC Zip Code 20003-3400

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 05 / 2015  
**Transaction ID : SA12.469.3.4**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 1101 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2504

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
03 / 27 / 2015  
**Transaction ID : SA12.265.3.4**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 MASSACHUSETTS AVE NW  
 City WASHINGTON State DC Zip Code 20005-4171  
 FEC ID number of contributing federal political committee. **C** C00238725  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.358.3.4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. NATIONAL BEER WHOLESALERS ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 KING ST  
 City ALEXANDRIA State VA Zip Code 22314-2944  
 FEC ID number of contributing federal political committee. **C** C00144766  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2015  
**Transaction ID : SA12.345.3.4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 EXECUTIVE CIR  
 City IRVING State TX Zip Code 75038-2522  
 FEC ID number of contributing federal political committee. **C** C00140061  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2015  
**Transaction ID : SA12.436.3.4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 31 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACT**

Mailing Address 1850 M ST NW

City WASHINGTON State DC Zip Code 20036-5803

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

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  
 05 / 05 / 2015  
**Transaction ID : SA12.470.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PA**

Mailing Address 2055 L ST NW

City WASHINGTON State DC Zip Code 20036-4983

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

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  
 03 / 27 / 2015  
**Transaction ID : SA12.274.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

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  
 03 / 31 / 2015  
**Transaction ID : SA12.356.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 32 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD NE

City ATLANTA State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 27 / 2015  
**Transaction ID : SA12.317.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 27 / 2015  
**Transaction ID : SA12.277.3.4**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. VIACOM INTERNATIONAL INC PAC**

Mailing Address 1501 M STREET  
SUITE 1100

City WASHINGTON State DC Zip Code 20005-1729

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
04 / 29 / 2015  
**Transaction ID : SA12.418.3.4**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. SCALISE LEADERSHIP FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00568162

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209968.55

Date of Receipt  
06 / 11 / 2015  
**Transaction ID : SA12.10931**

Amount of Each Receipt this Period  
17918.41

Memo Item  
TRANSFER

TRANSFER OF NET JFC FUNDS TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. GREGG L. HARTLEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 857 CEDAR DRIVE

City DEALE State MD Zip Code 20751-9613

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

Name of Employer Occupation  
CLOAKROOM ADVISORS PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
05 / 26 / 2015  
**Transaction ID : SA12.529.3.5**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 PRINCE ST

City ALEXANDRIA State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 19 / 2015  
**Transaction ID : SA12.489.3.5**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....▶ 17918.41

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. COMCAST CORPORATION & NBCUNIVERSAL PAC**

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19103-2833

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 29 / 2015  
**Transaction ID : SA12.536.3.5**

Amount of Each Receipt this Period  
2000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 19 / 2015  
**Transaction ID : SA12.486.3.5**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 2345 CRYSTAL DRIVE SUITE 800

City ARLINGTON State VA Zip Code 22202-4813

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
05 / 26 / 2015  
**Transaction ID : SA12.516.3.5**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION PAC**

Mailing Address 25 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20001-1430

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer	Occupation

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
05	/	29	/	2015

**Transaction ID : SA12.539.3.5**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (X)**

Mailing Address 1800 LARIMER ST

City	State	Zip Code
DENVER	CO	80202-1402

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer	Occupation

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
05	/	19	/	2015

**Transaction ID : SA12.494.3.5**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (X)**

Mailing Address 1800 LARIMER ST

City	State	Zip Code
DENVER	CO	80202-1402

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer	Occupation

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
05	/	29	/	2015

**Transaction ID : SA12.537.3.5**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 36 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. SCALISE LEADERSHIP FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00568162

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209968.55

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA12.10932**

Amount of Each Receipt this Period  
34455.26

Memo Item  
TRANSFER

TRANSFER OF NET JFC FUNDS TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. MARTIN BIENENSTOCK**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11 TIMES SQUARE

City NEW YORK State NY Zip Code 10036-6600

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

Name of Employer Occupation  
PROSKANER ROSE LLP ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA12.665.3.6**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C. ABBVIE PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1 N WAUKEGAN RD

City LAKE BLUFF State IL Zip Code 60044-1667

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 25 / 2015  
**Transaction ID : SA12.605.3.6**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	34455.26
<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 37 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. AIR LINE PILOTS ASSOC. INT'L PAC**

Mailing Address 1625 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer	Occupation

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
06	/	26	/	2015

**Transaction ID : SA12.654.3.6**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACT**

Mailing Address 100 W DANIA BEACH BLVD

City	State	Zip Code
DANIA BEACH	FL	33004-3643

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer	Occupation

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
06	/	26	/	2015

**Transaction ID : SA12.659.3.6**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**C. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COM**

Mailing Address 1300 MORRIS DR

City	State	Zip Code
CHESTERBROOK	PA	19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2015

**Transaction ID : SA12.549.3.6**

Amount of Each Receipt this Period  
2000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 38 OF 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTI**

Mailing Address 440 FIRST ST NW

City WASHINGTON State DC Zip Code 20001-2028

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 25 / 2015  
**Transaction ID : SA12.609.3.6**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

Full Name (Last, First, Middle Initial)  
**B. EXELON CORPORATION PAC**

Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 11 / 2015  
**Transaction ID : SA12.575.3.6**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

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

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
06 / 26 / 2015  
**Transaction ID : SA12.651.3.6**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 90
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Eye of the Tiger Political Action Committee**

**A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1401 H STREET NW SUITE 1200  
 City WASHINGTON State DC Zip Code 20005-2110  
 FEC ID number of contributing federal political committee. **C** C00105981  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 11 / 2015  
**Transaction ID : SA12.580.3.6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**B. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1771 N ST NW  
 City WASHINGTON State DC Zip Code 20036-2800  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 25 / 2015  
**Transaction ID : SA12.627.3.6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM SLF - JOINT FUNDRAISING COMMITTEE

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	209968.55

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. KELLY HUSTED**

Mailing Address 139 LABARRE DRIVE

City METAIRIE State LA Zip Code 70001-5432

Purpose of Disbursement  
EVENT EXPENSES-SEE MEMOS

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2015

Transaction ID : SB21B.I9616

Amount of Each Disbursement this Period

758.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. PARTY CITY**

Mailing Address 3009 VETERANS MEMORIAL BOULEVARD

City METAIRIE State LA Zip Code 70002-6046

Purpose of Disbursement  
EVENT SUPPLIES

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2015

Transaction ID : SB21B.I8154

Amount of Each Disbursement this Period

537.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. KELLY HUSTED**

Mailing Address 139 LABARRE DRIVE

City METAIRIE State LA Zip Code 70001-5432

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2015

Transaction ID : SB21B.I9617

Amount of Each Disbursement this Period

2000.00

Memo Item

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

2758.07

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. KELLY HUSTED**

Mailing Address 139 LABARRE DRIVE

City METAIRIE State LA Zip Code 70001-5432

Purpose of Disbursement  
EVENT EXPENSES-SEE MEMOS

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2015

Transaction ID : SB21B.I9621

Amount of Each Disbursement this Period

759.56

Memo Item

Full Name (Last, First, Middle Initial)

**B. KELLY HUSTED**

Mailing Address 139 LABARRE DRIVE

City METAIRIE State LA Zip Code 70001-5432

Purpose of Disbursement  
EVENT FEES

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2015

Transaction ID : SB21B.I9615

Amount of Each Disbursement this Period

600.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX OFFICE**

Mailing Address 3815 VETERANS BOULEVARD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

Transaction ID : SB21B.I8599

Amount of Each Disbursement this Period

43.00

Memo Item

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

759.56

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. KELLY HUSTED**

Mailing Address 139 LABARRE DRIVE

City METAIRIE State LA Zip Code 70001-5432

Purpose of Disbursement FUNDRAISING CONSULTING

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2015

Transaction ID : SB21B.I9623

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address 1229 WISCONSIN AVE

City WASHINGTON State DC Zip Code 20007-3222

Purpose of Disbursement EQUIPMENT PURCHASE

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2015

Transaction ID : SB21B.I8096

Amount of Each Disbursement this Period

897.82

Memo Item

Full Name (Last, First, Middle Initial)

**C. BAYOU BAKERY, COFFEE BAR & EATERY**

Mailing Address 1515 N. COURTHOUSE ROAD

City ARLINGTON State VA Zip Code 22201-2909

Purpose of Disbursement FOOD & BEVERAGE

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2015

Transaction ID : SB21B.I8449

Amount of Each Disbursement this Period

455.60

Memo Item

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

3853.42

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BLUE FROG CHOCOLATES**

Mailing Address 5707 MAGAZINE ST.

City NEW ORLEANS State LA Zip Code 70115-3209

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8831**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAFE PHILLIPS**

Mailing Address 1401 H STREET NW

City WASHINGTON State DC Zip Code 20005-2110

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8174**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CONCENTRIC OFFICE, LLC**

Mailing Address 8136 OLD KEENE MILL ROAD  
SUITE A300

City SPRINGFIELD State VA Zip Code 22152-1853

Purpose of Disbursement  
COMPLIANCE SERVICES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8334**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CONCENTRIC OFFICE, LLC**

Mailing Address 8136 OLD KEENE MILL ROAD  
SUITE A300

City SPRINGFIELD State VA Zip Code 22152-1853

Purpose of Disbursement  
COMPLIANCE SERVICES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8337**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DCITY SMOKEHOUSE**

Mailing Address 8 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001-1160

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8379**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. DCITY SMOKEHOUSE**

Mailing Address 8 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001-1160

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8380**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. DCITY SMOKEHOUSE**

Mailing Address 8 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001-1160

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8381**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DCITY SMOKEHOUSE**

Mailing Address 8 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001-1160

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8382**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX OFFICE**

Mailing Address 3815 VETERANS BOULEVARD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
POSTAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8597**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. FEDEX OFFICE**

Mailing Address 3815 VETERANS BOULEVARD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
POSTAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8598**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8776**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8778**

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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.I8780**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.I8785**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.I8787**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8792**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8797**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8801**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8803**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8805**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8810**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8811**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8814**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8816**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8817**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRIS TEETER**

Mailing Address 1350 POTOMAC AVENUE SE

City WASHINGTON State DC Zip Code 20003-4426

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8824**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HERTZ RENT-A-CAR**

Mailing Address 1 AVIATION CIRCLE

City WASHINGTON State DC Zip Code 20001-6000

Purpose of Disbursement  
TRANSPORTATION

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8220**

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)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS**

Mailing Address 1919 CONNECTICUT AVE., NW

City WASHINGTON State DC Zip Code 20009-5701

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8363**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HILTON HOTELS**

Mailing Address 1919 CONNECTICUT AVE., NW

City WASHINGTON State DC Zip Code 20009-5701

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8364**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HILTON HOTELS**

Mailing Address 1919 CONNECTICUT AVE., NW

City WASHINGTON State DC Zip Code 20009-5701

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8366**

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)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS**

Mailing Address 1919 CONNECTICUT AVE., NW

City WASHINGTON State DC Zip Code 20009-5701

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8369**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HILTON HOTELS**

Mailing Address 1919 CONNECTICUT AVE., NW

City WASHINGTON State DC Zip Code 20009-5701

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8371**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTEL MONTELEONE**

Mailing Address 214 ROYAL ST

City NEW ORLEANS State LA Zip Code 70130-2227

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8260**

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)

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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HOTEL MONTELEONE**

Mailing Address 214 ROYAL ST

City NEW ORLEANS State LA Zip Code 70130-2227

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8262**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTEL MONTELEONE**

Mailing Address 214 ROYAL ST

City NEW ORLEANS State LA Zip Code 70130-2227

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8263**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTEL MONTELEONE**

Mailing Address 214 ROYAL ST

City NEW ORLEANS State LA Zip Code 70130-2227

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.I8265**

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:  
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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HOTEL MONTELEONE**

Mailing Address 214 ROYAL ST

City NEW ORLEANS State LA Zip Code 70130-2227

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8270**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTIN'S WINE AND SPIRITS**

Mailing Address 1919 FLORIDA AVE NW

City WASHINGTON State DC Zip Code 20009-1266

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8872**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. NOLA PARTY BEADS**

Mailing Address 116 VICTORS ROAD

City BELLE CHASSE State LA Zip Code 70037-1244

Purpose of Disbursement  
EVENT SUPPLIES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8062**

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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PARTY CITY**

Mailing Address 3316 DONNELL DRIVE

City FORESTVILLE State MD Zip Code 20747-3207

Purpose of Disbursement  
EVENT SUPPLIES

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2015

Transaction ID : SB21B.I8481

Amount of Each Disbursement this Period

121.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. PARTY CITY**

Mailing Address 3316 DONNELL DRIVE

City FORESTVILLE State MD Zip Code 20747-3207

Purpose of Disbursement  
EVENT SUPPLIES

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2015

Transaction ID : SB21B.I8484

Amount of Each Disbursement this Period

179.73

Memo Item

Full Name (Last, First, Middle Initial)

**C. PARTY CITY**

Mailing Address 3316 DONNELL DRIVE

City FORESTVILLE State MD Zip Code 20747-3207

Purpose of Disbursement  
EVENT SUPPLIES

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2015

Transaction ID : SB21B.I8485

Amount of Each Disbursement this Period

37.08

Memo Item

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

338.07

**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)

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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. S.J.R.P. CUSTOM CREATIONS**

Mailing Address 13457 ORLEANS DRIVE

City State Zip Code  
GONZALES LA 70737-6888

Purpose of Disbursement  
EVENT SUPPLIES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8583**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City State Zip Code  
WASHINGTON DC 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8113**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City State Zip Code  
WASHINGTON DC 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8114**

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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8117**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8118**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8120**

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**

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FOR LINE NUMBER:  
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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8122**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8125**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8129**

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:  
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<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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. SCHNEIDER'S OF CAPITOL HILL**

Mailing Address 300 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5702

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8133**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE MYSTICK KREWE OF LOUISIANIANS, INC.**

Mailing Address 8941 JEFFERSON HIGHWAY

City BATON ROUGE State LA Zip Code 70809-2407

Purpose of Disbursement  
EVENT TICKETS

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8014**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MYSTICK KREWE OF LOUISIANIANS, INC.**

Mailing Address 8941 JEFFERSON HIGHWAY

City BATON ROUGE State LA Zip Code 70809-2407

Purpose of Disbursement  
EVENT TICKETS

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.I8016**

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**

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<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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. TOTAL WINE & MORE**

Mailing Address 1451 CHAIN BRIDGE ROAD

City MCLEAN State VA Zip Code 22101-3722

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8081**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. TOTAL WINE AND MORE**

Mailing Address 6240 LITTLE RIVER TURNPIKE

City ALEXANDRIA State VA Zip Code 22312-1714

Purpose of Disbursement  
FOOD & BEVERAGE

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8563**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. URBANSTEMS.COM**

Mailing Address

City NEW YORK State NY Zip Code

Purpose of Disbursement  
GIFT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.I8391**

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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. WE, THE PIZZA**

Mailing Address 305 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-1148

Purpose of Disbursement  
FOOD & BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2015

Transaction ID : SB21B.I8688

Amount of Each Disbursement this Period

88.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. WE, THE PIZZA**

Mailing Address 305 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-1148

Purpose of Disbursement  
FOOD & BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 13 / 2015

Transaction ID : SB21B.I8689

Amount of Each Disbursement this Period

207.02

Memo Item

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

295.82

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

52427.45

**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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANDY BARR FOR CONGRESS, INC.**

Mailing Address P.O. BOX 2059

City LEXINGTON State KY Zip Code 40588-2059

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**GARLAND ANDY BARR**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: KY District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2015

Transaction ID : **SB23.I9338**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BENISHEK FOR CONGRESS, INC.**

Mailing Address 802 PENTOGA TRAIL

City CRYSTAL FA State MI Zip Code 49920-0108

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DANIEL J. BENISHEK**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
04 / 27 / 2015

Transaction ID : **SB23.I9270**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BENISHEK FOR CONGRESS, INC.**

Mailing Address 802 PENTOGA TRAIL

City CRYSTAL FA State MI Zip Code 49920-0108

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DANIEL J. BENISHEK**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9276**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

12500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BUCK FOR COLORADO**

Mailing Address P.O. BOX 338018

City GREELEY State CO Zip Code 80633-0634

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**KENNETH BUCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CO District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

Transaction ID : **SB23.I9252**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BUDDY CARTER FOR CONGRESS**

Mailing Address 200 E ST JULIAN ST SUITE 603  
SUITE 603

City SAVANNAH State GA Zip Code 31401-2754

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**EARL LEORY CARTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9208**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CARLOS CURBELO CONGRESS**

Mailing Address 8770 SW 72ND STREET  
# 355

City MIAMI State FL Zip Code 33173-3512

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**CARLOS CURBELO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 15 / 2015

Transaction ID : **SB23.I8964**

Amount of Each Disbursement this Period

4500.00

Memo Item

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

5500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CARLOS CURBELO CONGRESS**

Mailing Address 8770 SW 72ND STREET  
# 355

City MIAMI State FL Zip Code 33173-3512

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**CARLOS CURBELO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

Transaction ID : **SB23.I8965**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CARLOS CURBELO CONGRESS**

Mailing Address 8770 SW 72ND STREET  
# 355

City MIAMI State FL Zip Code 33173-3512

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**CARLOS CURBELO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : **SB23.I8966**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHARLIE DENT FOR CONGRESS**

Mailing Address P.O. BOX 442

City ALLENTOWN State PA Zip Code 18105-0442

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**CHARLES DENT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I9247**

Amount of Each Disbursement this Period

500.00

Memo Item

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

6000.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.**

Mailing Address P.O. BOX 11091

City CHATTANOOGA State TN Zip Code 37401-2091

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**CHARLES FLEISCHMANN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

Transaction ID : **SB23.I9585**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.**

Mailing Address P.O. BOX 11091

City CHATTANOOGA State TN Zip Code 37401-2091

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**CHARLES FLEISCHMANN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	5

Transaction ID : **SB23.I9588**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. COFFMAN FOR CONGRESS 2016**

Mailing Address 4950 S YOSEMITE STREET  
# 511

City GREENWOOD VILLAGE State CO Zip Code 80111-1349

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**MICHAEL COFFMAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : **SB23.I9056**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

1	1	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	0	0	0	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 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO RE-ELECT TRENT FRANKS TO CONGRESS**

Mailing Address P.O. BOX 8105

City State Zip Code  
GLENDALE AZ 85312-8105

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**TRENT FRANKS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9305**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMSTOCK FOR CONGRESS**

Mailing Address P.O. BOX 831

City State Zip Code  
MCLEAN VA 22101-0831

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**BARBARA COMSTOCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I9185**

Amount of Each Disbursement this Period

4500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. COMSTOCK FOR CONGRESS**

Mailing Address P.O. BOX 831

City State Zip Code  
MCLEAN VA 22101-0831

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**BARBARA COMSTOCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9189**

Amount of Each Disbursement this Period

500.00

Memo Item

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

5500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CRESENT HARDY FOR CONGRESS**

Mailing Address P.O. BOX 753941

City LAS VEGAS State NV Zip Code 89136-3941

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**CRESENT HARDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I9002**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CRESENT HARDY FOR CONGRESS**

Mailing Address P.O. BOX 753941

City LAS VEGAS State NV Zip Code 89136-3941

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**CRESENT HARDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2015

Transaction ID : **SB23.I9003**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DENHAM FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DR., #150  
SUITE 150

City SACRAMENTO State CA Zip Code 95833-4131

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**JEFF DENHAM**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9044**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

10500.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. DOLD FOR CONGRESS**

Mailing Address P.O. BOX 6312

City LIBERTYVILLE State IL Zip Code 60048-6312

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**ROBERT JAMES DOLD JR.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I9568**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DONOVAN FOR CONGRESS**

Mailing Address 440 LEVERETT AVENUE

City STATEN ISLAND State NY Zip Code 10308-1333

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**DAN DONOVAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Special Primary

State: NY District: 11

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2015

Transaction ID : **SB23.I8877**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DONOVAN FOR CONGRESS**

Mailing Address 440 LEVERETT AVENUE

City STATEN ISLAND State NY Zip Code 10308-1333

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**DAN DONOVAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I8878**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. DR. BRIAN BABIN FOR CONGRESS**

Mailing Address P.O. BOX 159

City State Zip Code  
WOODVILLE TX 75979-0159

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**BRIAN BABIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 36

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2015

Transaction ID : **SB23.I9195**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ELISE FOR CONGRESS**

Mailing Address P.O. BOX 338

City State Zip Code  
WILLSBORO NY 12996-0338

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**ELISE STEFANIK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I9373**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ELISE FOR CONGRESS**

Mailing Address P.O. BOX 338

City State Zip Code  
WILLSBORO NY 12996-0338

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**ELISE STEFANIK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

Transaction ID : **SB23.I9376**

Amount of Each Disbursement this Period

500.00

Memo Item

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

10500.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ELISE FOR CONGRESS**

Mailing Address P.O. BOX 338

City WILLSBORO State NY Zip Code 12996-0338

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**ELISE STEFANIK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9377**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ELISE FOR CONGRESS**

Mailing Address P.O. BOX 338

City WILLSBORO State NY Zip Code 12996-0338

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**ELISE STEFANIK**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 21

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : **SB23.I9378**

Amount of Each Disbursement this Period

1485.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVID JOLLY**

Mailing Address P.O. BOX 1158

City INDIAN ROCKS BEACH State FL Zip Code 33785-1158

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DAVID JOLLY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 13

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2015

Transaction ID : **SB23.I9020**

Amount of Each Disbursement this Period

500.00

Memo Item

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

2485.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF TODD YOUNG, INC.**

Mailing Address P.O. BOX 1053

City BLOOMINGTON State IN Zip Code 47402-1053

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**TODD CHRISTOPHER YOUNG**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IN District: 09

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2015

Transaction ID : **SB23.I9226**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF FRANK GUINTA**

Mailing Address P.O. BOX 877

City MANCHESTER State NH Zip Code 03105-0877

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**FRANK GUINTA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NH District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I9317**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MIA LOVE**

Mailing Address P.O. BOX 255

City RIVERTON State UT Zip Code 84065-0255

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**MIA LOVE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: UT District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2015

Transaction ID : **SB23.I9509**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

12000.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. GARRET GRAVES FOR CONGRESS**

Mailing Address P.O. BOX 64845

City State Zip Code  
BATON ROUGE LA 70896-4845

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name  
**GARRET GRAVES**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: LA District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2015

Transaction ID : **SB23.I9501**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HEALTHCARE FREEDOM FUND**

Mailing Address P.O. BOX 2485

City State Zip Code  
SPRINGFIELD VA 22152-0485

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : **SB23.I9103**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HUIZENGA FOR CONGRESS**

Mailing Address 441 WILLIAMS COURT

City State Zip Code  
ZEELAND MI 49464-1509

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name  
**WILLIAM HUIZENGA**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MI District: 02

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9083**

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)..... ▶

2000.00

**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 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. HURD FOR CONGRESS**

Mailing Address P.O. BOX 656

City HELOTES State TX Zip Code 78023-0656

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**WILLIAM HURD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

**Transaction ID : SB23.I8983**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HURD FOR CONGRESS**

Mailing Address P.O. BOX 656

City HELOTES State TX Zip Code 78023-0656

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**WILLIAM HURD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2015

**Transaction ID : SB23.I8985**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HURD FOR CONGRESS**

Mailing Address P.O. BOX 656

City HELOTES State TX Zip Code 78023-0656

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**WILLIAM HURD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

**Transaction ID : SB23.I8986**

Amount of Each Disbursement this Period

500.00

Memo Item

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

10500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. JEFF FORTENBERRY FOR UNITED STATES CONGRESS**

Mailing Address P.O. BOX 30265

City LINCORN State NE Zip Code 68503-0265

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**JEFFREY FORTENBERRY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NE District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2015

Transaction ID : **SB23.I9341**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JEFF MILLER FOR CONGRESS**

Mailing Address P.O. BOX 126

City PENSACOLA State FL Zip Code 32591-0126

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**JEFFERSON B. MILLER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2015

Transaction ID : **SB23.I9298**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KATKO FOR CONGRESS**

Mailing Address P.O. BOX 133

City CAMILLUS State NY Zip Code 13031-0133

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**JOHN KATKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 24

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9023**

Amount of Each Disbursement this Period

500.00

Memo Item

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

3500.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. KATKO FOR CONGRESS**

Mailing Address P.O. BOX 133

City CAMILLUS State NY Zip Code 13031-0133

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**JOHN KATKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 24

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I9024**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KELLY FOR CONGRESS**

Mailing Address 5221-A CLIFF GOOKIN BLVD

City TUPELO State MS Zip Code 38801-6781

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**JOHN TRENT KELLY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District: 01

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Special Runoff

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9284**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KINZINGER FOR CONGRESS**

Mailing Address P.O. BOX 2365

City OTTAWA State IL Zip Code 61350-6965

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**ADAM KINZINGER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9287**

Amount of Each Disbursement this Period

500.00

Memo Item

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

10500.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. LAHOOD FOR CONGRESS**

Mailing Address P.O. BOX 10735

City PEORIA State IL Zip Code 61612-0735

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**DARIN MACKAY LAHOOD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Special Primary

State: IL District: 18

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : SB23.I9480

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARTHA ROBY FOR CONGRESS**

Mailing Address P.O. BOX 195

City MONTGOMERY State AL Zip Code 36101-0195

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**MARTHA ROBY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : SB23.I9459

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MCSALLY FOR CONGRESS**

Mailing Address P.O. BOX 19128

City TUCSON State AZ Zip Code 85731-9128

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**MARTHA MCSALLY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : SB23.I9058

Amount of Each Disbursement this Period

500.00

Memo Item

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

10500.00

**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)

PAGE 78 OF 90

<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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MCSALLY FOR CONGRESS**

Mailing Address P.O. BOX 19128

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2015

 City State Zip Code  
 TUCSON AZ 85731-9128
**Transaction ID : SB23.I9064**
 Purpose of Disbursement  
 COMMITTEE CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

**MARTHA MCSALLY**
Category/  
Type

5000.00

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼
 Memo Item

State: AZ District: 02

Full Name (Last, First, Middle Initial)

**B. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 1212

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2015

 City State Zip Code  
 MURPHYSBORO IL 62966-1212
**Transaction ID : SB23.I9000**
 Purpose of Disbursement  
 COMMITTEE CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

**MICHAEL BOST**
Category/  
Type

5000.00

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼
 Memo Item

State: IL District: 12

Full Name (Last, First, Middle Initial)

**C. MIKE KELLY FOR CONGRESS**

Mailing Address P.O. BOX 476

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

 City State Zip Code  
 LYNDORA PA 16045-0476
**Transaction ID : SB23.I9294**
 Purpose of Disbursement  
 COMMITTEE CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

**GEORGE KELLY**
Category/  
Type

500.00

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼
 Memo Item

State: PA District: 03

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

10500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MOOLENAAR FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE SUITE 100  
SUITE 100

City MIDLAND State MI Zip Code 48640-6824

Purpose of Disbursement  
2014 PRIMARY DEBT RETIREMENT

011  
Category/  
Type

Candidate Name  
**JOHN MOOLENAAR**

Office Sought:  House  Senate  President  
State: MI District: 04  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Debt Retirement

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2015

Transaction ID : **SB23.I9447**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MOOLENAAR FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE SUITE 100  
SUITE 100

City MIDLAND State MI Zip Code 48640-6824

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011  
Category/  
Type

Candidate Name  
**JOHN MOOLENAAR**

Office Sought:  House  Senate  President  
State: MI District: 04  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
04 / 27 / 2015

Transaction ID : **SB23.I9448**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PALAZZO FOR CONGRESS**

Mailing Address 13155 HIGHWAY 67 SUITE B  
SUITE B

City BILOXI State MS Zip Code 39532-8745

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011  
Category/  
Type

Candidate Name  
**STEVEN MCCARTY PALAZZO**

Office Sought:  House  Senate  President  
State: MS District: 04  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2015

Transaction ID : **SB23.I9597**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

9500.00

**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 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PAT MEEHAN FOR CONGRESS**

Mailing Address 50 S. PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063-3531

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**PATRICK MEEHAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I9172**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. POLIQUIN FOR CONGRESS**

Mailing Address P.O. BOX 50

City OAKLAND State ME Zip Code 04963-0050

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**BRUCE POLIQUIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : **SB23.I9561**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. POLIQUIN FOR CONGRESS**

Mailing Address P.O. BOX 50

City OAKLAND State ME Zip Code 04963-0050

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**BRUCE POLIQUIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 29 / 2015

Transaction ID : **SB23.I9562**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

8000.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. RODNEY FOR CONGRESS**

Mailing Address P.O. BOX 344

City TAYLORVILLE State IL Zip Code 62568-0344

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**RODNEY DAVIS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9158**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RODNEY FOR CONGRESS**

Mailing Address P.O. BOX 344

City TAYLORVILLE State IL Zip Code 62568-0344

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**RODNEY DAVIS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9162**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RYAN COSTELLO FOR CONGRESS**

Mailing Address P.O. BOX 3154

City WEST CHESTER State PA Zip Code 19381-3154

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

**RYAN COSTELLO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : **SB23.I8959**

Amount of Each Disbursement this Period

500.00

Memo Item

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

6000.00

**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"/> 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. RYAN COSTELLO FOR CONGRESS**

Mailing Address P.O. BOX 3154

City WEST CHESTER State PA Zip Code 19381-3154

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**RYAN COSTELLO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I8962**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. STEVE KNIGHT FOR CONGRESS**

Mailing Address P.O. BOX 984

City WILLOWS State CA Zip Code 95988-0984

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**STEVE KNIGHT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 25

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2015

Transaction ID : **SB23.I9576**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. STEVE RUSSELL FOR CONGRESS**

Mailing Address P.O. BOX 95023

City OKLAHOMA CITY State OK Zip Code 73143-5023

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**STEVEN DANE RUSSELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OK District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9326**

Amount of Each Disbursement this Period

500.00

Memo Item

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

10500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. STEVE RUSSELL FOR CONGRESS**

Mailing Address P.O. BOX 95023

City OKLAHOMA CITY State OK Zip Code 73143-5023

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Category/  
Type

Candidate Name  
**STEVEN DANE RUSSELL**

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	7		2	0	1	5		

**Transaction ID : SB23.I9327**

Amount of Each Disbursement this Period

4	5	0	0	.	0	0
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. TOM MACARTHUR FOR CONGRESS INC.**

Mailing Address P.O. BOX 225

City COLONIA State NJ Zip Code 07067-0225

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Category/  
Type

Candidate Name  
**THOMAS MACARTHUR**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NJ District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	3		2	0	1	5		

**Transaction ID : SB23.I9406**

Amount of Each Disbursement this Period

4	5	0	0	.	0	0
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. TOM MACARTHUR FOR CONGRESS INC.**

Mailing Address P.O. BOX 225

City COLONIA State NJ Zip Code 07067-0225

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Category/  
Type

Candidate Name  
**THOMAS MACARTHUR**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NJ District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	3		2	0	1	5		

**Transaction ID : SB23.I9407**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Memo Item

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

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

9	5	0	0
---	---	---	---

9	5	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 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)

**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. VALADAO FOR CONGRESS**

Mailing Address 5132 N PALM AVENUE  
# 227

City FRESNO State CA Zip Code 93704-2236

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DAVID VALADAO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 21

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2015

Transaction ID : **SB23.I9240**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE (VIEW PAC)**

Mailing Address 701 8TH STREET NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001-3965

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2015

Transaction ID : **SB23.I9101**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALBERG FOR CONGRESS**

Mailing Address P.O. BOX 1362

City JACKSON State MI Zip Code 49204-1362

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**TIMOTHY L. WALBERG**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2015

Transaction ID : **SB23.I9422**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. WALBERG FOR CONGRESS**

Mailing Address P.O. BOX 1362

City JACKSON State MI Zip Code 49204-1362

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**TIMOTHY L. WALBERG**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MI District: 07

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9424**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. WALORSKI FOR CONGRESS INC**

Mailing Address P.O. BOX 954

City MISHAWAKA State IN Zip Code 46546-0954

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**JACKIE WALORSKI (SWIHART)**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IN District: 02

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2015

Transaction ID : **SB23.I9140**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALTERS FOR CONGRESS**

Mailing Address C/O 8001 IRVINE CENTER DRIVE, #400  
SUITE 400

City IRVINE State CA Zip Code 92618-2956

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**MIMI WALTERS**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 45

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : **SB23.I9249**

Amount of Each Disbursement this Period

500.00

Memo Item

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

1500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. YODER FOR CONGRESS, INC**

Mailing Address P.O. BOX 26742

City OVERLAND PARK State KS Zip Code 66225-6742

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**KEVIN YODER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: KS District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9365**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. YOUNG FOR IOWA, INC.**

Mailing Address P.O. BOX 162

City VAN METER State IA Zip Code 50261-0162

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DAVID YOUNG**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

Transaction ID : **SB23.I9550**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. YOUNG FOR IOWA, INC.**

Mailing Address P.O. BOX 162

City VAN METER State IA Zip Code 50261-0162

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**DAVID YOUNG**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2015

Transaction ID : **SB23.I9553**

Amount of Each Disbursement this Period

500.00

Memo Item

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

3500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. YOUNG FOR IOWA, INC.**

Mailing Address P.O. BOX 162

City VAN METER State IA Zip Code 50261-0162

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name  
**DAVID YOUNG**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 03

011  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I9554**

Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ZELDIN FOR CONGRESS**

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967-2758

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name  
**LEE MICHAEL ZELDIN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 01

011  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : **SB23.I8989**

Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZELDIN FOR CONGRESS**

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967-2758

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name  
**LEE MICHAEL ZELDIN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 01

011  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : **SB23.I8992**

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)..... ▶

10500.00

**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 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ZINKE FOR CONGRESS**

Mailing Address P.O. BOX 1596

City HELENA State MT Zip Code 59624-1596

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**RYAN ZINKE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MT District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2015

Transaction ID : **SB23.I9084**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ZINKE FOR CONGRESS**

Mailing Address P.O. BOX 1596

City HELENA State MT Zip Code 59624-1596

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**RYAN ZINKE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MT District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2015

Transaction ID : **SB23.I9085**

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RICK W. ALLEN FOR CONGRESS**

Mailing Address P.O. BOX 338

City AUGUSTA State GA Zip Code 30903-0338

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

011

Candidate Name  
**RICHARD ALLEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : **SB23.I9457**

Amount of Each Disbursement this Period

500.00

Memo Item

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

5500.00

**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"/> 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)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. NRCC

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
COMMITTEE CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 23 / 2015

Transaction ID : SB23.I9381

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

15000.00

232985.00

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Eye of the Tiger Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. GORDON DOVE CAMPAIGN FUND**

Mailing Address PO BOX 629

City HOUMA State LA Zip Code 70361-0629

Purpose of Disbursement  
NON FEDERAL CONTRIBUTION

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
NON FEDERAL

State: District:

Date of Disbursement

/  /

Transaction ID : **SB29.I8325**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. JOE MURRAY FOR STATE SENATE**

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313-6141

Purpose of Disbursement  
NON FEDERAL COMMITTEE CONTRIBUTION

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
NON FEDERAL

State: District:

Date of Disbursement

/  /

Transaction ID : **SB29.I8188**

Amount of Each Disbursement this Period

Memo Item

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

/  /

Amount of Each Disbursement this Period

Memo Item

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

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